

# How to complete the application for authorization of a private intervenor **Group**

### A. Mandatory information

A group who asks to be authorized to act as a private intervenor must provide the returning officer of its electoral division with the information stipulated in section 457.4 of the *Election Act*.

### 1. Group

Enter on the first line the name of the group as well as the date it was formed. On the second line, enter its address and telephone number. On the third line, enter the purposes for which the group was formed.

### 2. Main leaders of the group

Enter the surname and given name of the main leaders of the group, the address of their domicile as well as their telephone number. If the group has more than five leaders, please attach a schedule providing this same information about the leaders you cannot enter on the form.

### 3. Members of the group

Indicate the actual or approximate number of members in the group.

### 4. Representative of the group

Enter on the first line the surname, given name and date of birth of the person representing the group. On the second line, enter that person's address of domicile and telephone number.

### 5. Purpose for the application for authorization (specify the matter of public interest, where applicable)

Indicate the purpose of the application for authorization specifying, where applicable, the matter of public interest about which the group wishes to express its views.

#### B. Sworn declaration of the representative of the group

The group's representative must sign this section and ask a person authorized to administer oaths to sign it as well. Anyone who is authorized to do so by a Quebec law (for example, a commissioner for oaths, a lawyer or a notary) may receive an oath under the *Courts of Justice Act* (RLRQ, c. T-16). The returning officer of the electoral division who receives the authorization request, an assistant returning officer and any other member of the election staff may also receive this oath, with the exception of the information and law enforcement officer, under the *Election Act* (RLRQ, c. E-3.3).

### C. Attestation of this application for authorization

The returning officer of your electoral division must complete this section. Make careful note of the authorization number that will be assigned to you (000-000) as this number must appear on all your publicity.



## Application for authorization of a private intervenor **Group**

### A. Mandatory information

. Group:		Year	Month	Day
Name of the group  Address		Date of its formation  Telephone number		
2. Main leaders of the group: Surname and given name	Address of domicile	Telephone number		e number
B. Actual or approximate number of	members in the group:			
Representative of the group (elector):		Year	Month	Day
Given name and surname of the representative of the group in capital letters		Date of birth		
Address of domicile		Telephone number		

### B. Sworn declaration of the representative of the group 1. For the election of \_\_\_\_\_ \_\_\_\_, I declare that: Date of the election - I represent \_\_\_\_\_ Name of the group - I am a qualified elector and most of the members of the group are electors; - I do not intend to directly promote or oppose a candidate or a party; - I am not a member of any party; - I am not acting directly or indirectly on behalf of a candidate or party; - To the best of my knowledge, no member of the group has obtained an authorization as a private intervenor for a similar purpose or has made an application for authorization that is still pending. 2. I agree to comply with the applicable provisions of the Act, in particular, to not exceed the amount of \$300.00 in publicity expenses (s. 404 (13°)). Signature of the representative of the group Sworn before me at \_\_\_\_\_ , on this \_\_\_\_\_ Name of the municipality Person authorized to administer oaths C. Attestation of this application for authorization I accept this application for authorization for the period that will end on \_\_\_\_\_ Date of the election For this purpose, I am assigning the following authorization number: Signature of the returning officer Date Name of the electoral division