

Guide to completing an application for authorization of an independent candidate or an elector who undertakes to run as an independent candidate

Section 1

IDENTIFICATION

In this section, you enter your personal contact information.

Section 2

APPLICATION FOR AUTHORIZATION

In this section, you enter the details related to the event for which you are submitting your application.

Section 3

MAILING ADDRESS

In this section, you enter the address at which you wish to receive documents sent by the Chief Electoral Officer or from the offices of Élections Québec. This can be your own address, that of your official representative and agent or any other address.

Section 4

APPOINTMENT OF OFFICIAL REPRESENTATIVE AND AGENT

Here you enter the name, address and telephone number of your official representative and agent, who must be a qualified elector. His or her signature is required.

Mandatory training

The official representative signs and dates this section and provides his or her email address in order to take the mandatory training provided by the Chief Electoral Officer.

Section 5

SIGNATURE

You must sign and date the application for authorization in this section in order for the application to be admissible.

Section 6

ATTESTATION OF THE APPLICATION FOR AUTHORIZATION

Do not enter anything in this section. It is reserved for the Chief Electoral Officer or the returning officer in your electoral division.

If you submit your application for authorization prior to the period set for the filing of nomination papers, send your authorization form and the appendix to the following address:

**Élections Québec
Service du Registre, de la coordination et de la gestion des contributions politiques
1045, avenue Wilfrid-Pelletier, bureau 200
Québec (Québec) G1W 0C6**

For more information, contact the returning officer in your electoral division or the Direction du financement politique of Élections Québec

Telephone – toll-free: **1-866-232-6494**

Telephone – Québec City area: **418-644-3570**

Application for authorization of an independent candidate or an elector
who undertakes to run as an independent candidate

NOTE: This form is not a nomination paper.

Before completing this form, refer to the relevant sections of the *Election Act*, specifically sections 41, 42, 43, 45.1, 59, 59.1 and 408.1.

1. IDENTIFICATION

| | | | | | |
|---|-------------------------------------|--------|-------------|-----------|------------------|
| <input type="checkbox"/> Mr <input type="checkbox"/> Mrs | Family name of candidate or elector | | Given name | | |
| Home address | Number | Street | Apt. | Area code | Telephone number |
| | Municipality | | Postal code | Area code | Telephone number |
| | Email address | | | | |

2. APPLICATION FOR AUTHORIZATION

☐ PRIOR TO SUBMISSION OF NOMINATION PAPER
Elector who undertakes to run as a candidate in the next election
☐ BY-ELECTION OR ☐ GENERAL ELECTION → Date of election (if known) _____
I am hereby applying to the Chief Electoral Officer for authorization as an elector who undertakes to run as a candidate
in the electoral division of: _____
Name of electoral division
in accordance with section 59.1 of the *Election Act*. Enclosed is form DGE-208.1 containing the signatures and addresses of at least 100 electors from the electoral division in support of my application.

☐ FOLLOWING SUBMISSION OF NOMINATION PAPER
I confirm that my nomination as an independent candidate in the election of _____
Date of election
in the electoral division of _____
Name of electoral division was accepted by the returning officer and
hereby ask to be authorized in this capacity by the Chief Electoral Officer, in accordance with section 59 of the *Election Act*.

3. MAILING ADDRESS

Correspondence mailed to me must be sent to the following address:

☐ Same as Section 1 or

| | | | |
|--------|--------|--------------|-------------|
| Number | Street | Municipality | Postal code |
|--------|--------|--------------|-------------|

4. APPOINTMENT OF OFFICIAL REPRESENTATIVE AND AGENT

The family name, given name, address and telephone number of my official representative and agent who will keep the books and accounts related to contributions collected and expenses incurred:

| | | | | |
|---|-------------|--------------|-------------|------------------|
| <input type="checkbox"/> Mr <input type="checkbox"/> Mrs | Family name | Given name | Area code | Telephone number |
| Number | Street | Municipality | Postal code | |

Signature of official representative and agent

Date

MANDATORY TRAINING (section 45.1, 408.1 *Election Act*)

In my capacity as official representative and agent, I agree to take the mandatory training as required under section 45.1 of the EA within 30* days of my appointment and any other complementary training, where applicable. The Chief Electoral officer is required to post in the Register of authorized political entities of Québec (RAPEQ), which is published on its website, a mention to the effect that I have taken the training. My email address is provided below for the purpose of this training.

Email address required for training purposes

Signature of official representative and agent

Date

*When authorization is granted during the election period, the time limit for taking the training is 10 days (sections 59 and 408.1).

5. SIGNATURE

Signature of independent candidate or elector

Date

6. ATTESTATION OF THE APPLICATION FOR AUTHORIZATION

I accept your application.

Signature of Chief Electoral Officer or returning officer

Date