

General instructions

Completing the Form – On Paper or Onscreen

- The form can be filled out onscreen and saved with Adobe Professional. Print the form to collect the necessary signatures.
- If you cannot save, print all completed pages before closing the window. Information that is not saved will be lost.
- If there is insufficient space for your entries, photocopy the page or click "+(additional page)" in the heading to generate an extra page in a new window. Save or print the page before closing the window.
- Important: Be sure the completed form is fully signed and dated.

Submitting the Form – By Mail, Fax or E-mail

- The form can be submitted to the Registration Unit by mail, fax or e-mail. For e-mail, scan a signed copy and send it as an attachment.
- Since incomplete information may delay the processing of your submission, be sure to provide all information requested. Failure to do so may result in your submission being rejected.

Privacy statement

The personal information supplied on this form is collected under the authority of the Canada Elections Act for the purpose of administering the registration of political entities. The information is available for public inspection in accordance with the Act, and certain information is published on the Elections Canada website at www.elections.ca. You have a right to access and/or to request a correction of your personal information under the *Privacy Act*. For details on the collection and use of this information, consult the entry for Personal Information Bank CEO PPU 036 at www.elections.ca.

Please contact us if you have questions or require any help in completing the form.

Elections Canada Registration Unit, Political Financing 30 Victoria Street Gatineau, Quebec K1A 0M6

Tel.: 1-800-486-6563 (toll-free) TTY: 1-800-361-8935 (toll-free) Fax: 1-877-877-9517 (toll-free) E-mail: political.financing@elections.ca

Website: www.elections.ca



Section A	identifying information						
Full name of tl	he registered party						
Full name of	each new or changed division	Province/Territory	Name of the division's chief executive office				
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
		-					
Section B	Submission type and declaration by the	leader					
Type 1			ns of a registered party				
	This is an application to register one or more provincial/territorial divisions of a registered party						
	Complete all sections I certify that the provincial and/or territorial divis	sions listed above are divisions	of the party				
	r certify that the provincial and/or territorial divis	sions listed above are divisions	or the party.				
		11					
	Signature of the leader		Year Month Day				
Type 2	This is a report of changes to the information	on recorded in the Registry of	Parties				
•	Complete only sections with changes						
	I certify that the information set out in this repo	rt is complete and accurate.					
	I		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Signature of the leader		Year Month Day				
			-				



Full name of the division			Full name of the registered party				
Complete sections C to	G for each i	new or change	ed provincial/territorial	l division of th	ne regist	ered party	
Section C Chief executive	officer info	rmation					
Registration of first or ne Change of contact inform		tive officer, appo			n Day	I	
Surname Given name			<u> </u>	In		orrespondence English	
Address (residential)			Mailing address (if different)				
City	Prov./Terr.	Postal code	City	Prov./Terr.		Postal code	
E-mail address (optional)			Telephone	Fax	Fax		
Section D Address where	communicat	tions may be s	sent (headquarters)				
Same as address in Section							
Address							
City			Prov./Terr.	Posta	Postal code		
E-mail address (optional)			Telephone	Fax	Fax		
Section E Address where	books and r	ooordo oro ko	nt				
Same as address in Section		ecords are ke	ρι				
Address							
City			Prov./Terr.	Poets	al code		
Oity			1 100.7 1011.	1 050	ai code		
E-mail address (optional)			Telephone	Fax	Fax		



Full name of the division	Full name of the registered party						
Section F Officers of the div	ision						
Remove officers from the Registry	+ (additiona	l page)					
Name					Date	terminated I Year	Month Day
Name			Date L	terminated Year			
Name Date terminated Year M							
Add or update officers in the Regis	try + (addition	onal page)					
New division officer, appointment effective Hear Month Day Change of contact information only							
Surname	Surname		Init. Position title				
Address (residential)	Mailing address (if different)						
City	Prov./Terr.	Postal code	City Prov./Terr. Postal code			Postal code	
New division officer, appointment effective Month Day Change of contact information only							
Surname		Given name	Init. Position title				
Address (residential) Mailing address (if different)							
City Prov./Terr.		Postal code	City			Prov./Terr.	Postal code
New division officer, appointment effective Month Day Change of contact information only							
Surname	Given name	Init. Position title					
Address (residential)			Mailing address (if different)				
City	Prov./Terr.	Postal code	City Prov./Terr. Postal code			Postal code	



Full name of the division	on		Full name of the registered party					
Section G Registered agent	s of the div	rision, if any						
Remove agents from the Registry	+ (additiona	l page)						
Name			Da	te terminated	Month Day			
Name			Da	te terminated Year	 			
Add or update agents in the Regis	try + (addition	onal page)						
New division agent, appointme	nt effective	Year	Month Day Change of c	contact inform	nation only			
Surname			Given name		Init.			
If a corporation, name of the corpora	ation		Name of the person authorized to sign on behalf of the corporation					
Specify the terms and conditions of this appointment								
Address (residential)			Mailing address (if different)					
City	Prov./Terr.	Postal code	City	Prov./Terr.	Postal code			
New division agent, appointment effective								
Surname			Given name		Init.			
If a corporation, name of the corporation			Name of the person authorized to sign on behalf of the corporation					
Specify the terms and conditions of	this appointn	nent						
Address (residential)			Mailing address (if different)					
City	Prov./Terr.	Postal code	City	Prov./Terr.	Postal code			