

APPLICATION TO AMEND VOTERS' LIST
DEMANDE DE CHANGEMENT À LA LISTE ÉLECTORALE

Form/Formulaire EL15

Municipal Elections Act, 1996 (s.17, s.24, s.25)

Loi de 1996 sur les élections municipales (art.17, art.24, art.25)

Check only one / Cocher une case

- add** applicant's name to list / **ajouter** le nom du demandeur à la liste
- correct** applicant's information on list / **corriger** les renseignements sur le demandeur
- delete** applicant's or family member's name from list / **supprimer** le demandeur ou le membre de sa famille de la liste
- deceased** / **décédé** **moved** / **déménagé** **other** / **autre**

Please confirm that you are a Canadian Citizen Veillez confirmer si vous êtes citoyen canadien <input type="checkbox"/>		Date of birth Date de naissance			Year/Année	Month/Mois	Day/Jour
					<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name/ Nom de famille		First name / Prénom		Middle name / Prénom			

Qualifying address on voting day Adresse admissible le jour des élections				At qualifying address, applicant is: À l'adresse admissible, le demandeur est:			
Street number & name Numéro et nom de rue		Apt. # N°. d'app.	Roll number N°. du role	Voting subdivision Section de vote		<input type="checkbox"/> owner since _____ propriétaire depuis <input type="checkbox"/> tenant since _____ locataire depuis <input type="checkbox"/> other since _____ chambreur depuis <input type="checkbox"/> spouse/conjoint(e) <input type="checkbox"/> unqualified (deleted name only) non qualifié (nom supprimé seulement)	
City Ville		Postal code Code postal	(if house apartment, indicate floor level-e.g. basement, 1 st floor, etc.) (si app. dans la maison, indiquer l'étage)				

Previous qualifying address (if applicable) Adresse admissible précédente (si tel est le cas)				At previous address, applicant was: À l'adresse précédente, le demandeur était:			
Street number & name Numéro et nom de rue		Apt. # N°. d'app.	Roll number N°. du role	Voting subdivision Section de vote		<input type="checkbox"/> owner / propriétaire <input type="checkbox"/> tenant / locataire <input type="checkbox"/> other / chambreur <input type="checkbox"/> spouse/conjoint(e)	
City Ville		Postal code Code postal	(if house apartment, indicate floor level-e.g. basement, 1 st floor, etc.) (si app. dans la maison, indiquer l'étage)				

Current mailing address of applicant Adresse postale actuelle du demandeur				(if different than <i>qualifying address</i> above) (si différente de l'adresse admissible)				At mailing address, applicant is: À l'adresse postale le demandeur est:			
Street number & name Numéro et nom de rue		Apt. # N°. d'app.	City Ville	Postal code Code postal		<input type="checkbox"/> owner / propriétaire <input type="checkbox"/> tenant / locataire <input type="checkbox"/> other / chambreur <input type="checkbox"/> spouse/conjoint(e)					

School Support / Soutien scolaire	
<input type="checkbox"/> Applicant is Roman Catholic (includes Greek & Ukrainian Catholics) Le demandeur est catholique (comprend les catholiques Grecs et Ukrainiens)	
<input type="checkbox"/> Applicant has French Language Education Rights (does not include French immersion nor French as a second language) Le demandeur a droit à l'enseignement en langue française (n'inclut pas les programmes d'immersion ou de français langue seconde)	

Applicant wishes to be an elector for the following school board Le demandeur désire être un électeur du conseil scolaire suivant:			
<input type="checkbox"/> English-Public anyone can support English-public Public anglais toutes les personnes sont admissibles	<input type="checkbox"/> English-Separate must be a Roman Catholic Séparé anglais seules les personnes catholiques		
<input type="checkbox"/> French-Public must have French Language Education Rights Public français seules les personnes ayant droit à l'enseignement en langue française	<input type="checkbox"/> French-Separate must be Roman Catholic and have French Language Education Rights Séparé français seules les personnes catholiques ayant droit à l'enseignement en langue française		

I, the undersigned, hereby declare that I am a Canadian citizen, that I have attained the age of eighteen (18) years on or before Voting Day, and that on Voting Day, I am entitled to be an elector in accordance with the facts or information submitted on this form, and that I understand the effect thereof. I hereby apply to have my name included or amendments made on the Voters' List in accordance with such facts or information.

Je, soussigné(e), déclare être citoyen(ne) canadien(ne), et avoir atteint l'âge de dix-huit (18) ans le jour ou avant le jour du scrutin, et que le jour du scrutin, je suis admissible selon les faits et renseignements soumis sur ce formulaire, et que je connais les conséquences. Par la présente, je demande que mon nom ou ces changements soient inclus sur la liste électorale selon les dits faits ou renseignements.

Signature of applicant / Signature du demandeur

Date

Certificate of Approval (to be completed by Clerk or designate)

Certificat d'approbation (à être complété par le greffier ou la personne désignée)

 Approved / Approuvé **Refused (state reason)**
Rejeté (précisez la raison)

I hereby certify that the Voters' List for said voting subdivision in this municipality shall be amended in accordance with the statement of facts or information contained herein.

Je déclare que la liste électorale pour la dite section de vote de cette municipalité sera amendée selon les faits et renseignements déclarés ci-haut

Signature of Clerk or designate / Signature du greffier ou de la personne désignée

date

This information is collected under authority of s.17, s.24 and s.25 of the *Municipal Elections Act* and s.15 and s.16 of the *Assessment Act* and will be used to determine voter eligibility.Ces renseignements sont recueillis en vertu des articles 17, 24 et 25 de la *Loi sur les élections municipales* et des articles 15 et 16 de la *Loi sur l'évaluation foncière* et serviront à déterminer l'admissibilité à voter.

FORM 2a

TOWNSHIP OF RUSSELL

APPLICATION FOR RE-ISSUE OF A VOTER'S INFORMATION LETTER (Internet Interrupted)

Surname:		Given Name(s):	
Full Address of Residence:	Apt No.	Postal Code	
Mailing Address (if different)		Tel. No.:	
		Polling Subdivision Number:	

I, _____, being the above named individual and having provided satisfactory identification to the Election Official, do hereby make the following declaration:

- That I am an eligible voter for the Township of Russell and that I am on the Voters' List or have made an application to be included on the Voters' List;

 That I have not voted for the following offices since my Internet service was interrupted:

- I realize that under no circumstances will I be voting for other offices.

I, _____, solemnly declare that all the statements contained in this application are true and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act dated this _____ day of _____, _____. I further understand that making a false statement is an offence under the Municipal Elections Act, 1996 and that I will be subject to prosecution.

Signature of Applicant

Signature of Election Official

FOR USE BY ELECTION OFFICIAL ONLY
PROCEDURAL POLICY FOR RE-ISSUANCE

- Verification of Voter Identification Number _____
(Signature of Election Official)
- Issuance of Voter Information Letter:
NEW Voter Identification Number: _____
- Activation of Voter Identification Number: _____
(Signature of Election Official)

SIGNATURE OF ACKNOWLEDGEMENT

I, the above named individual, hereby acknowledge receipt of a NEW Voter Information Letter provided by the Election Official.

Signature of Applicant

Date

I, the above named Election Official, do hereby acknowledge that I have provided a NEW Voter Information Letter to the applicant and have followed the procedures identified above.

Signature of Election Official

Date

APPLICATION FOR RE-ISSUE OF A VOTER'S INFORMATION
LETTER (USED BY AN IMPERSONATOR)

Surname:		Given Name(s):	
Full Address of Residence:		Apt No.	Postal Code
Mailing Address (if different)		Tel. No.:	
		Polling Subdivision Number:	

I, _____, being the above named individual and having provided satisfactory identification to the Election Official, do hereby make the following declaration AND provide the required information to the Election Official:

1. That I am an eligible voter for the Township of Russell and that I am on the Voters' List or have made an application to be included on the Voters' List;
2. That I have not received by mail a Voter Information Letter from the Township of Russell and an imposter has voted without my express authorization

OR (check applicable box)

- That I have lost or misplaced the Voter Information Letter provided by the Township of Russell and unable to locate the said Voter Information Letter for the purpose of voting by telephone or by Internet and that an imposter has voted without my express authorization.
3. That I have not voted or have not personally used the Voter Information Letter to vote nor have I provided and given my Voter Information Letter to another person for the purpose of voting.
 4. That I have no knowledge, direct or indirect, as to who has used my Voter Information Letter to vote in my name

OR (check applicable box)

- I have personal knowledge of who has used my Voter Information Letter to vote and I have provided such information to the Election Official for the purpose of providing the same to the Ontario Provincial Police for further investigation and prosecution.
5. That I have answered all questions of the Election Official truthfully and to the best of my knowledge and further understand that the Ontario Provincial Police may be communicating with me for the purpose of furthering this investigation and prosecution of the imposter(s) of corrupt election practices or mail tampering or fraud.
 6. That should a New Voter Information Letter be issued by an Election Official that, as a condition to re-issuance, that I will be required to vote only at the Help Centre of the Township of Russell.
 7. That I further agree that should I obtain additional information as to who has voted on my behalf that I will communicate such information with the Election Official and the Ontario Provincial Police.

I, _____, solemnly declare that all the statements contained in this application are true and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act dated this _____ day of _____, _____ and do hereby accept the terms and conditions of this application.

I, _____, further acknowledge that any false statement made is an offence either under the Municipal Elections Act and/or an infraction under the Criminal Code of Canada and subject to penalties and/or a term of imprisonment.

Signature of Applicant

Signature of Election Official
(Witness as to the Signature of the Applicant)

TOWNSHIP OF RUSSELL
APPLICATION FOR RE-ISSUE OF A VOTER'S INFORMATION
LETTER (USED BY AN IMPERSONATOR) (page 2)

Surname:	Given Name(s):	
Full Address of Residence:	Apt No.	Postal Code
Mailing Address (if different)		Tel. No.:
Polling Subdivision Number:		

PROCEDURES OF ELECTION OFFICIAL

1. Verification that the Voter Identification Number has been used: _____
(Signature of Election Official)
2. Issuance of Voter Information Letter:
NEW Voter Identification Number: _____
3. Activation of Voter Identification Number: _____
(Signature of Election Official)

SIGNATURE OF ACKNOWLEDGEMENT BY APPLICANT

I, the above named individual, hereby acknowledge receipt of a NEW Voter Information Letter provided by the Election Official and agree that I will vote immediately at the Help Centre and further understand that should I leave the Help Centre WITHOUT VOTING that the Voter Information Letter received will be deactivated and that I will not be further entitled to vote.

Signature of Applicant

Date

I, the above named Election Official, do hereby acknowledge that I have provided a NEW Voter Information Letter to the applicant and have followed the procedures identified above.

Signature of Election Official

Date

FOR USE BY THE ELECTION OFFICIAL
VOTER LEAVES HELP CENTRE WITHOUT VOTING

1. Voter has immediately left Help Centre:
 - a) Deactivate the Voter Identification Number.
 - b) Verify de-activation of Voter Identification Number.
2. Voter has left Help Centre after voting:
 - a) Verify if Identification Number has been used to confirm that the elector has voted. If Voter Identification Number is still active after elector has voted, the following must be completed:
 - i) Deactivate Voter Voter Identification Number immediately;
 - ii) Document and provide copy to the Ontario Provincial Police for investigation of corrupt practices.

SIGNATURE OF ELECTION OFFICIAL THAT VOTER HAS LEFT HELP CENTRE WITHOUT VOTING

Signature

Date

Time

FORM 4

TOWNSHIP OF RUSSELL

**ORAL OATH OF INCAPACITY
TO VOTE WITHOUT ASSISTANCE**

MUNICIPAL ELECTIONS ACT, 1996

I, _____, being an elector
(name of the elector as it appears or is intended to appear on the Voters' List or document)

entitled to vote in the Township of Russell declare that I am:

(state one:)

- illiterate;
- visually impaired;
- physically challenged;
- require assistance for personal reasons;

**And THEREFORE I REQUIRE ASSISTANCE TO VOTE BY
TELEPHONE OR INTERNET WITH A FRIEND (OR ELECTION
OFFICIAL).**

FORM 5

TOWNSHIP OF RUSSELL

ORAL OATH OF FRIEND OF ELECTOR

MUNICIPAL ELECTIONS ACT, 1996

I, _____ a friend of _____,
(name of friend in full) *(the elector as it appears or is intended to appear on the Voters' List or document)*

an elector who is

(state one:)

- illiterate;
- visually impaired;
- physically challenged;
- requiring assistance for personal reasons;

And who is entitled to vote in the Township of Russell declare:

- **THAT I will vote by telephone or internet as directed by the elector; and**
- **THAT I will keep secret the manner in which this elector voted.**

FORM 6

TOWNSHIP OF RUSSELL

ORAL OATH OF INTERPRETER

MUNICIPAL ELECTIONS ACT, 1996

I, _____ acting as interpreter for _____
(name of interpreter in full) *(Name of elector as it appears or is intended to appear)*

_____, an elector entitled to vote in the Township of Russell,
(on the Voters' List or document)

declare:

THAT I will faithfully translate the necessary oaths as well as any lawful questions necessarily put to the elector and his/her answers at the Help Centre or any other location for voting as may be determined by the Clerk.

FORM 8

TOWNSHIP OF RUSSELL

APPOINTMENT OF SCRUTINEER

Municipal Elections Act, 1996 (s. 16(1))

Check here if appointment applies to all Voting Places within the municipality

I, _____, **Candidate** for the office of _____

hereby appoint _____ to act as a **Scrutineer** to represent me at the location(s) set out above, during the voting process of the Municipal Elections to be held from October 22nd, 2014 to October 27th, 2014 during the opening hours of the Revision or Help Centres or at other voting location(s) as may be determined by the Clerk of the Township of Russell.

I also hereby appoint the above named individual to be present during the receipt of the final vote (results) to be received at the Town Hall on October 27th, 2014 and to obtain a copy of the advance votes as described in the "Telephone and Internet Voting and Election Procedures Manual" approved by the Clerk of the Township of Russell.

This form must be signed by the Candidate and will be required to be shown to an Election Official at the Revision Centre, the Help Centre or at any other voting location(s) designated by the Clerk or at the place where votes are being received. Failure to show proof of appointment or to adhere to the instructions of the Election Official will result in a direction to leave the Revision Centre, the Help Centre or any other location(s) designated by the Clerk as a Voting Location. **Use of a cellular telephone within the Revision Centre, the Help Centre or other designated location(s) is strictly prohibited.**

Signature of Candidate

Date

I, the person named above as scrutineer for the above noted candidate, do solemnly swear (or affirm) that I will:

- maintain and aid in maintaining the secrecy of the voting and,
- not interfere nor attempt to interfere with an elector when he/she is voting by telephone or by Internet; or
- attempt to obtain or communicate any information as to how an elector is about to vote or has voted, or
- directly or indirectly induce an elector to show how she/he has voted.

Declared before me at the Township)
of Russell in the United Counties of)
Prescott and Russell this _____)
day of _____, _____)

Signature of Person appointed as Scrutineer

Signature of Election Official

TOWNSHIP OF RUSSELL

OATH OF CANDIDATE

NAME OF CANDIDATE: _____ (print name)

FOR THE OFFICE OF: _____ (print)

I, the person named above, do solemnly swear (or affirm) that I will:

- maintain and aid in maintaining the secrecy of the voting and,
- not interfere nor attempt to interfere with an elector when he/she is voting by telephone or by Internet, obtain or communicate any information as to how an elector is about to vote or has voted, or directly or indirectly induce an elector to show how he/she has voted to any person.

This form must be signed by the Candidate and may be required to be shown to an Election Official at the Revision Centre, Help Centre or at any other voting location as may be determined by the Clerk. **USE OF A CELLULAR TELEPHONE WITHIN THE HELP CENTRE OR THE REVISION CENTRE IS STRICTLY PROHIBITED.**

Declared before me at the Township)
of Russell in the United Counties of)
Prescott and Russell this _____)
day of _____, _____.)

Signature of Candidate

Signature of Election Official

APPOINTMENT AND OATH OF AN ELECTION OFFICIAL
2014 MUNICIPAL ELECTIONS

MUNICIPAL ELECTIONS ACT, 1996

I, Joanne Camiré Laflamme, Clerk of the Township of Russell and Returning Officer for the 2014 Municipal Elections do hereby appoint:

[Empty rectangular box for name]

as an Election Official for the Township of Russell with the following delegated responsibilities and appropriate corresponding authority:

- 1. To receive and certify applications for Additions, Corrections and Deletions to the Voters' List (Form 1);
2. To receive and certify applications for Voters' Information Letter- Lost and Unused (Form 2);
3. To receive and certify applications for Voters' Information Letter - (Internet Interrupted) (Form 2a);
4. To receive and certify applications for Voters' Information Letter (Impersonator) (Form 3);
5. To administer oaths as may be required under the "Telephone Voting, Internet Voting and Election Procedures" including all forms, as approved by the Clerk of the Township of Russell, in addition to oaths that may be required under the Municipal Elections Act, 1996;
6. To attend at the Revision and Help Centres of the Township of Russell including all other locations that the Clerk may establish for voting purposes;
7. To maintain an audit trail of all Voter Information Letters and Voter Identification Numbers issued or cancelled;
8. To report to the Clerk any complaints or knowledge of infractions to the Municipal Elections Act, 1996 including any voting irregularities or corrupt practices.

The Clerk may also assign, in writing or by way of an amendment to this appointment, any other election duties as he deems appropriate.

Joanne Camiré Laflamme, Clerk

Date of Appointment

I, _____, the above named individual, do hereby accept the appointment as Election Official for the Township of Russell for the year 2014 Municipal Elections and the duties and responsibilities assigned as per the appointment by the Clerk.

AND THAT I will act faithfully in the capacity of Election Official for the Township of Russell and perform all the duties required by law without partiality, fear, favour or affection and that I do solemnly swear (or affirm) that I will:

- maintain and aid in maintaining the secrecy of the voting; and
• that I will not, nor attempt to:
i) interfere with an elector when he/she is voting by telephone or internet;
ii) obtain or communicate any information as to how an elector is about to vote or has voted, or
iii) directly or indirectly induce an elector to show how he/she has voted.

SWORN AND AFFIRMED BEFORE ME)
at the Township of Russell in the)
United Counties of Prescott and Russell)
this _____ day of _____, _____.)

Signature of Election Official

**APPLICATION FOR REMOVAL OF ANOTHER'S NAME FROM VOTERS' LIST
REQUÊTE DE RADIATION DU NOM D'UNE AUTRE PERSONNE DE LA LISTE ÉLECTORALE**

Municipal Elections Act, 1996 (s. 25) / Loi de 1996 sur les élections municipales (art.25)

(Prepare in triplicate)

Municipality		
Surname of Applicant		Given Names
Full Address of Residence	Apt No.	Postal Code

IN RESPECT OF

Name as Entered on Voters' List		
Full Address of Residence	Apt No.	Postal Code

ENTERED ON LIST FOR

Ward No. (if any)	Voting Subdivision No. (if any)	Assessment Roll Number (to be completed by Clerk or designated election official)
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Municipalité

STATEMENT BY APPLICANT

I, the undersigned, hereby state:

That I have good reason to believe that the person named above as entered on the Voters' List for the said voting subdivision in this municipality is not entitled to be an elector and to have her/his name entered thereon;

That I will personally or by a representative attend a hearing to be held by the Clerk or designate and there establish the validity of my application, the facts in support of which are as follows:

(signature of applicant)

(date signed)

(Préparer trois exemplaires)

Municipalité	
Nom de l'auteur de la demande	Prénom(s)
Adresse complète de résidence App n°	Code postal

EN CE QUI CONCERNE

Nom tel qu'il apparaît sur la liste électorale	
Adresse complète de résidence App n°	Code Postal

INSCRIT SUR LA LISTE POUR

N° du quartier (le cas échéant)	N° de la section de vote (le cas échéant)	N° du rôle d'évaluation (fourni par le secrétaire ou par le scrutateur adjoint désigné)
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DÉCLARATION DE L'AUTEUR DE LA DEMANDE

Je, soussigné déclare par la présente:

Que j'ai de bonnes raisons de croire que la personne nommée ci-dessus, dont le nom figure sur la liste électorale pour la section de vote municipale susmentionnée de cette municipalité, n'a pas le droit d'être électeur et d'avoir son nom inscrit sur la liste; et

Que j'assisterai personnellement, ou enverrai un représentant assister à une audience devant le secrétaire ou une personne désignée, pour y établir la validité de ma demande, appuyée par les faits suivants:

(signature de l'auteur de la demande)

(date signée)

NOTICE OF HEARING / AVIS D'AUDIENCE

TAKE NOTICE that the above application has been filed with me under the authority of section 25 of the **Municipal Elections Act, 1996** alleging that the above named elector has been wrongfully included on the Voters' List prepared for the said voting subdivision in this municipality. Such name may be removed from the Voters' List if you or your representative do not appear at the hearing, to be held as set out below, to oppose this application and to substantiate your right to have your name remain on the list.

VEUILLEZ NOTER que la demande ci-dessus a été déposée auprès de moi, en vertu de l'article de la **Loi de 1996 sur les élections municipales**, alléguant que l'électeur nommé ci-dessus a été inclus par erreur sur la liste électorale préparée pour cette section de vote dans cette municipalité. Ce nom sera retiré de la liste électorale, si vous ou votre représentant n'apparaissez pas à l'audience, qui se tiendra comme indiqué ci-dessous, pour vous opposer à cette demande et établir votre droit à ce que votre nom demeure sur la liste.

Hearing to be held / L'audience se tiendra:
Date _____ Time / Heure _____
Place / Lieu _____
Address / Adresse _____

Signature of Municipal Clerk or designate
Signature du secrétaire municipal ou son représentant

NOTE: A hearing is not required to delete the name of a deceased person.
REMARQUE: Une audience n'est pas nécessaire pour supprimer le nom d'une personne décédée.

(date of notice / date de l'avis)

(telephone no. / numéro de téléphone)

OUTCOME OF HEARING / RÉSULTAT DE L'AUDIENCE

This application is / Cette demande est: approved / approuvée or / ou refused / rejetée
(Clerk shall note reasons for decision / Le secrétaire donne les raisons pour lesquelles il refuse la requête).

.....

.....

_____ Date _____ Municipal Clerk or designate / Le greffier ou son représentant

❖ See section 25 (3) - (9) for notice provisions. / Voir l'article 25 (3) - (9) à propos de préavis.

FORM 13

TOWNSHIP OF RUSSELL

**CANDIDATE'S DECLARATION -
PROPER USE OF VOTERS' LIST**

I, _____, being a candidate for the office of _____ at the 2014 elections, hereby request the clerk to provide me with the following information when it becomes available:

<input type="checkbox"/>	A paper copy of the Voters' List (on or before Wednesday, September 2, 2014) – please note that a copy of all revisions made to the Voters' List will be provided on or before Monday, September 22, 2014.
and	
<input type="checkbox"/>	<i>a copy of the Lists showing the name of each person who has voted in accordance with the schedules established in section 8.5 of the telephone voting, Internet voting and election procedures and forms.</i>

I, the undersigned, do hereby agree to use the Voters' List for election purposes only and I understand that I am prohibited by the Municipal Election Act, 1996 from using the Voters' List for commercial purposes.

Signature

Date

Name

**DECLARATION OF THE OWNER OR TENANT
FOR HIS/HER SPOUSE OR OCCUPANT WHO DOES NOT HAVE
ANY PIECE OF IDENTIFICATION (ADDITION TO THE VOTERS' LIST)**

I, _____, voter registered on the Voters' List for the 2014 elections, make the declaration that the following person lives at the following address : _____ as my :

spouse; or

other : _____ and he/she has not any piece of identification

showing his/her name and the address where he/she has the right to vote in the municipality.

Name of person being identified

Declare before me, at the Township of Russell, in the United Counties of Prescott and Russell, this ____ day of _____, 2014.

Signature of election official



Signature of person making the declaration