

# Form TP-1: THIRD PARTY Registration and Change Notice Form

## ***Completion Guide***

This form is available in hard copy or soft copy on the Elections Ontario website. Please print clearly or type. Every person or entity after having incurred expenses of \$500 or more on third party political advertising in either the six months before a fixed date general election (the non-election period) or during an election period and who is not a registered candidate, political party, or constituency association, must register with Elections Ontario by completing this form. Registration is not required where the third party is spending less than \$500 on political advertising in either the non-election period or the election period. There is no fee to register as a third party with the Chief Electoral Officer of Ontario.

### **A. THIRD PARTY INFORMATION**

Provide the name, address and contact information of the third party.

#### **Type of Registration**

For an entity applying as a third party, complete Section A1. For an individual applying as a third party, complete Section A2.

A new registration is the initial registration of a third party with the Chief Electoral Officer. A change notice is for informing the Chief Electoral Officer of any changes to the initial registration. For any changes, a revised TP-1 must be submitted immediately.

### **B. CHIEF FINANCIAL OFFICER (CFO)**

Every third party that is required to register must appoint a CFO. A CFO cannot be the auditor of his or her own third party, a returning officer, deputy returning officer, election clerk, candidate, or CFO or auditor of a registered candidate, political party, constituency association or leadership contestant. Provide the name, address and contact information of the CFO.

### **C. AUDITOR**

Where advertising expenses are \$5,000 or more, a third party must appoint an auditor who is licensed under the *Public Accounting Act, 2004*. An auditor for the Third Party cannot be the third party's CFO; a person who signed the application; a returning officer, deputy returning officer or election clerk; a candidate; or the CFO or auditor of a registered candidate, political party, constituency association or leadership contestant or of another registered third party. Provide the name, licence number, address and contact information of the auditor.

**D. PERSON(S) AUTHORIZED TO ACCEPT CONTRIBUTIONS**

Provide the name(s), address(es) and contact information of any person(s) who are authorized to accept contributions and make deposits.

**E. PLACE WHERE RECORDS ARE KEPT**

Provide the name of the record keeper and address of the place where the financial records are kept.

**F. FINANCIAL INSTITUTION(S) AND SIGNING OFFICER(S)**

Provide the name and address of each financial institution in Ontario at which an account has been opened. If there is more than one financial institution, attach a separate sheet.

Provide the name(s), address(es) and contact information of the signing officer(s) for each financial institution account.

**G. WHERE THE THIRD PARTY IS AN ENTITY WITH A GOVERNING BODY**

If the third party is an entity with a governing body, a copy of the resolution of the governing body authorizing the expenses incurred must be attached. If the third party is an entity that does not have a governing body or if the third party is an individual, no attachments are required.

**H. CERTIFICATION OF THIRD PARTY AND CFO**

The third party (or third party official) and CFO must complete and sign this section.

It is the third party's responsibility to file a complete and accurate registration form with the Chief Electoral Officer. Failure to provide the information required will delay the registration until all the required information is provided.

Forms may be submitted by any conventional delivery method, including mail, fax, email or hand delivery. The third party is considered to be registered on the day the form is submitted to the Chief Electoral Officer providing the form is properly completed and has the required signatures. Elections Ontario, prior to approving an application, can request further information and undertakings from the third party as determined necessary to verify compliance with the *Election Finances Act*.

The onus for proving delivery to the Chief Electoral Officer rests with the person asserting that delivery has been made. Filing requires actual receipt by the Chief Electoral Officer, not simply sending to the Chief Electoral Officer.

This form may be inspected during office hours of Elections Ontario. Any person may make extracts from the documents and is entitled to copies of the documents upon payment for their preparation at such rate as the Chief Electoral Officer may determine.

The Chief Electoral Officer's staff is always available to provide assistance. Please contact us at:

Elections Ontario	Telephone: (416)325-9401
Compliance Division	Toll Free: 1-866-566-9066
51 Rolark Drive	Fax: (416)325-9466
Toronto, ON M1R 3B1	Email: <a href="mailto:electfin@elections.on.ca">electfin@elections.on.ca</a>
Internet address: <a href="http://www.elections.on.ca">http://www.elections.on.ca</a>	



**Compliance Division**

51 ROLARK DRIVE  
TORONTO, ONTARIO M1R 3B1

Telephone: (416) 325-9401  
Toll Free: 1-866-566-9066  
FAX: (416) 325-9466

**TP-1 Third Party Registration and  
Change Notice Form**

*Disponible aussi en français.*

For Office Use Only			

**Section A: Third Party Information**

**Full Name:** \_\_\_\_\_

**Registration Type:** (check one) Entity (complete A1)  Individual (complete A2)   
(check one) New  Change

**A1: Entity Applicant**

**Organization Name:** \_\_\_\_\_ (if different from above)

**Principal Officers of A1: Entity Applicant**

<b>First Name:</b> _____	<b>Last Name:</b> _____
<b>Business Tel.:</b> _____	<b>Home Tel.:</b> _____
<b>Fax:</b> _____	<b>Email:</b> _____
<b>Address:</b> _____	
<b>City:</b> _____	<b>Postal Code:</b> _____

<b>First Name:</b> _____	<b>Last Name:</b> _____
<b>Business Tel.:</b> _____	<b>Home Tel.:</b> _____
<b>Fax:</b> _____	<b>Email:</b> _____
<b>Address:</b> _____	
<b>City:</b> _____	<b>Postal Code:</b> _____

**A2: Individual Applicant**

<b>First Name:</b> _____	<b>Last Name:</b> _____
<b>Business Tel.:</b> _____	<b>Home Tel.:</b> _____
<b>Fax:</b> _____	<b>Email:</b> _____
<b>Address:</b> _____	
<b>City:</b> _____	<b>Postal Code:</b> _____

**TP-1 Third Party Registration and Change Notice Form**

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**Section B: Chief Financial Officer (CFO)**

*Every third party that is required to register must appoint a CFO. Provide the name, address and contact information of the CFO.*

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Business Tel.:** \_\_\_\_\_ **Home Tel.:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

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**Section C: Auditor**

*Where advertising expenses are \$5,000 or more, a third party must appoint an auditor who is licensed under the Public Accounting Act, 2004. The CFO cannot be the auditor.*

**Firm Name:** \_\_\_\_\_  
**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Designation:** CPA  **License No.:** \_\_\_\_\_  
**Business Tel.:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_  
**Contact Person (if different from above)**  
**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

## TP-1 Third Party Registration and Change Notice Form

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### Section D: Persons Authorized to Accept Contributions

Provide the name(s), address(es) and contact information of any person(s) who are authorized to accept contributions and make deposits.

(check below if applicable)

- Make CFO a person authorized to accept contributions.

#### Authorized Person

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Office Held:** \_\_\_\_\_  
**Business Tel.:** \_\_\_\_\_ **Home Tel.:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

To add additional Authorized Persons, copy this page, fill out as necessary, and include with your application.

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### Section E: Place Where Records are Kept

Provide the name of the record keeper and address, in Ontario, of the place where financial records are kept.

(Check below if applicable.)

- Designate CFO's address as a location where records are kept.  
 Designate Third Party's address as a location where records are kept.

#### Record Keeper and Location

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Office Held:** \_\_\_\_\_  
**Business Tel.:** \_\_\_\_\_ **Home Tel.:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

To add additional Record Keepers and Locations, copy this page, fill out as necessary and include with your application.

**TP-1 Third Party Registration and Change Notice Form**

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**Section F: Financial Institution(s)**

*Provide the name and address of each financial institution in Ontario at which an account has been opened and the signing officer(s) for each account.*

**Institution:** \_\_\_\_\_

**Business Tel.:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Signing Officer(s) for this Account**

(Check below if applicable.)

Make CFO a signing officer for this account.

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Office Held:** \_\_\_\_\_

**Business Tel.:** \_\_\_\_\_ **Home Tel.:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

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**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Office Held:** \_\_\_\_\_

**Business Tel.:** \_\_\_\_\_ **Home Tel.:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

*To add additional Financial Institutions, Accounts, and/or Signing Officers, copy and fill out this page for each one and include with your application.*

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**Section G: Where the Third Party is an Entity with a Governing Body**

Attached is a copy of the resolution of the governing body, authorizing the third party entity to incur third party advertising expenses.

The third party entity does not have a governing body.

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### **Section H: Certification of Third Party and CFO**

*The Third Party and CFO must complete and sign this section.*

The registration form will be reviewed by Elections Ontario upon receipt of the form complete with signatures. Please submit this form to:

Elections Ontario  
Compliance Division  
51 Rolark Drive  
Toronto, Ontario M1R 3B1  
Email: [electfin@elections.on.ca](mailto:electfin@elections.on.ca)

This initial registration form must be completed and filed with the Chief Electoral Officer immediately after having incurred expenses of \$500 or more on political advertising in either the six months before a fixed date general election (the non-election period) or during an election period.

Registration is not required where the third party is spending less than \$500 on political advertising in either the non-election period or the election period.

There is no fee to register a third party with the Chief Electoral Officer of Ontario.

The Third Party has the responsibility to file a complete and accurate registration form under subsection 37.5 of the *Election Finances Act* with the Chief Electoral Officer. Failure to provide the information required in all applicable sections will delay the registration until all the required information is provided. The Chief Electoral Officer may rely and act on such information submitted by the Third Party and CFO of record. Where there is a change of CFO, the retiring CFO must ensure that the books of record are transferred to the newly appointed CFO. The Chief Electoral Officer will forward to the new CFO the information required to fulfill the responsibilities on behalf of the Third Party.

#### **Certification of Third Party**

I, \_\_\_\_\_ (Name of Third Party/Official), certify that the information on this form is to the best of my knowledge and belief true and correct.

Signature of Third Party/Official: \_\_\_\_\_

Date: \_\_\_\_\_

#### **Certification of CFO**

I, \_\_\_\_\_ (Name of Third Party's CFO), certify that the information on this form is to the best of my knowledge and belief true and correct.

Signature of CFO: \_\_\_\_\_

Date: \_\_\_\_\_