Completion Guide

This form is available on the Elections Ontario website. This form must be completed and filed with the Chief Electoral Officer before any financial activity occurs. When filling out this form, please print clearly or type your information. There is no fee to register as a nomination contestant with the Chief Electoral Officer of Ontario.

It is the nomination contestant's responsibility to file a complete and accurate registration form with the Chief Electoral Officer. Failure to provide the information required will delay the initial registration until all the required information is provided. Forms may be submitted by mail, fax, email, or hand delivery.

A. NOMINATION CONTEST INFORMATION

Type of Registration

A new registration is the initial registration of a nomination contestant with the Chief Electoral Officer. For a new registration, complete Sections A through I.

A change notice is for informing the Chief Electoral Officer of any changes to the initial registration. For any changes, a revised NC-1 must be submitted immediately. For a change notice, complete Sections A through H.

B. NOMINATION CONTESTANT INFORMATION

Provide the full name, address and contact information of the nomination contestant.

C. CHIEF FINANCIAL OFFICER (CFO)

The nomination contestant must appoint a CFO before registering. Provide the name, address and contact information of the CFO.

D. PRINCIPAL OFFICER(S)

Provide the name(s), address(es), and contact information of any principal officers of the nomination contestant.

E. PERSON(S) AUTHORIZED TO ACCEPT CONTRIBUTIONS

Provide the names, addresses and contact information of all persons authorized by the nomination contestant to accept contributions and make deposits. The nomination contestant is not allowed to accept contributions.

F. PLACE(S) WHERE RECORDS ARE KEPT

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

G. FINANCIAL INSTITUTION(S) AND SIGNING OFFICER(S)

Provide the name and address of each financial institution in which an account has been opened to be used by or on behalf of the nomination contestant. 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.

Η. CERTIFICATION OF NOMINATION CONTESTANT AND CFO

The nomination contestant and CFO must complete and sign this section.

CERTIFICATION OF POLITICAL PARTY'S CFO ű.

The CFO of the registered political party must complete and sign this section. The CFO of the political party (or designate) signing the form must currently be on file with the Chief Electoral Officer as per the most recently filed Registration and Change Notice Form - P-1 Form. The registered political party's CFO must provide written authorization for appointing a designate.

It is the nomination contestant'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.

The nomination contestant is considered to be registered on the day the form is received by the Chief Electoral Officer providing the form is properly completed and has the required signatures and the registered political party has submitted the Notice of Nomination Contest Form NC-2.

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. Certain data will also be extracted from the information filed and displayed on the Elections Ontario website.

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 26 Prince Andrew Place

Fax: (416)325-9466

Toronto, ON M3C 2H4 Email: electfin@elections.on.ca

Website: http://www.elections.on.ca



Compliance Division - 26 Prince Andrew Place Toronto, Ontario M3C 2H4 Telephone: (416) 325-9401 | Toll Free: 1-866-566-9066 | Fax: (416) 325-9466

| Disponible aussi en français. | | | | |
|--|----------------------|------------------|-------------------------|--|
| Contestant Registration Type: (chec | k one) New | Change | For Office Use Only | |
| Section A: Nomination Contest I | nformation | | | |
| Provincial Election Event Type: | | | | |
| (check one) General Election By-election | | | | |
| Nomination Contest Held by: | | | | |
| (check one) Political Party | Constituency | Association | | |
| Political Party: | | | | |
| Electoral District: | | | | |
| Section B: Nomination Contestar | nt Information | | | |
| First Name: | Last N | ame: | | |
| Business Phone: | Alterna | Alternate Phone: | | |
| Email Address: | | Fax: | | |
| Address: | | | | |
| City: | Postal | Postal Code: | | |
| Official Website(s): | | | | |
| Section C: Chief Financial Office | r (CFO) | | | |
| Every Nomination Contestant must app | point a CFO. The Nor | mination Contes | tant cannot be the CFO. | |
| First Name: | Last N | Last Name: | | |
| Business Phone: | Alterna | Alternate Phone: | | |
| Email Address: | | Fax: | | |
| Address: | | | | |
| City: | Postal | | | |



Section D: Principal Officers

Nomination Contestant Registration and Change Notice Form

| Provide the name(s) of any principal officer(s). | |
|---|---|
| First Name: | _Last Name: |
| Business Phone: | _Alternate Phone: |
| Email Address: | Fax: |
| Address: | |
| City: | _Postal Code: |
| First Name: | _Last Name: |
| Business Phone: | _Alternate Phone: |
| Email Address: | Fax: |
| Address: | |
| City: | Postal Code: |
| To add additional Principal Officers, copy this page application. | e, fill out as necessary, and include with your |
| Section E: Person(s) Authorized to Accept | Contributions |
| Provide the names and information of all persons v | who are authorized to accept contributions and |
| make deposits. The Nomination Contestant is not a | allowed to accept contributions. |
| (Check below if applicable.) | |
| ☐ Make CFO a person authorized to accept co | ontributions. |
| Additional Authorized Persons: | |
| First Name: | Last Name: |
| Office Held: | |
| | Alternate Phone: |
| Email Address: | Fax: |
| Address: | |
| | Postal Code: |
| | |

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



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Section F: Place Where Records are Kept

| Provide the name of the record keeper and addi | ess of the place in Ontario where financial | | | |
|---|--|--|--|--|
| records are kept. (Check below if applicable.) | | | | |
| Designate CFO's address as a location where records are kept. | | | | |
| ☐ Designate Nomination Contestant's addre | ess as a location where records are kept. | | | |
| Additional Record Keeper and Location: | | | | |
| First Name: | Last Name: | | | |
| Office Held: | | | | |
| Business Phone: | Alternate Phone: | | | |
| Email Address: | Fax: | | | |
| Address: | | | | |
| City: | Postal Code: | | | |
| To add additional Record Keepers and Locations, owith your application. | copy this page, fill out as necessary and include | | | |
| Section G: Financial Institution(s) and Sign | ning Officer(s) | | | |
| Provide the name and address of each financial insaccount, and the signing officer(s) for each accour | stitution at which the nomination contestant has an nt. | | | |
| Institution: | | | | |
| Address: | | | | |
| City: | Postal Code: | | | |
| Signing Officer(s) for this Account (Check below if applicable.) | | | | |
| Make CFO a signing officer for this accoun | nt. | | | |
| Additional Signing Officer(s) | | | | |
| First Name: | Last Name: | | | |
| Office Held: | | | | |
| | Alternate Phone: | | | |
| Email Address: | Fax: | | | |
| Address: | | | | |
| City: | | | | |
| | | | | |



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| First Name: | _Last Name: | |
|-----------------|-------------------|--|
| Office Held: | | |
| | _Alternate Phone: | |
| Email Address: | Fax: | |
| Address: | | |
| City: | Postal Code: | |
| First Name: | Last Name: | |
| Office Held: | | |
| Business Phone: | _Alternate Phone: | |
| Email Address: | Fax: | |
| Address: | | |
| City: | Postal Code: | |

To add additional Financial Institutions, Accounts, and/or Signing Officers, copy this page, fill out as necessary, and include with your application.

Section H: Certification of Nomination Contestant and CFO

The Nomination Contestant and CFO must complete and sign this section.

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

Elections Ontario Compliance Division 26 Prince Andrew Place Toronto, ON M3C 2H4 Email: electfin@elections.on.ca

This initial registration form must be completed and filed with the Chief Electoral Officer before any financial activity occurs. There is no fee to register a nomination contestant with the Chief Electoral Officer of Ontario.

The Nomination Contestant has the responsibility to file a complete and accurate registration form under section 12.1 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



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the Nomination Contestant 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 Nomination Contestant.

| Certification of Nomination Contestant | | | | | |
|---|--|--|--|--|--|
| I,, (Name | , (Name of Nomination Contestant), certify | | | | |
| that, to the best of my knowledge and belief, the ir | nformation on this form is true and correct. | | | | |
| | | | | | |
| X | | | | | |
| Signature of Nomination Contestant | Date | | | | |
| Certification of CFO | | | | | |
| I,, (Name of Nor | mination Contestant's CFO), certify | | | | |
| that, to the best of my knowledge and belief, the ir | nformation on this form is true and correct. | | | | |
| | | | | | |
| X | | | | | |
| Signature of CFO | Date | | | | |
| | | | | | |
| Section I: Certification of Political Party's CFO | 0 | | | | |
| The chief financial officer of the registered Political | Party must complete and sign this section. | | | | |
| l,, (Name | , (Name of CFO or Party designate), certify | | | | |
| that, this contestant has met the party's constituti | onal requirements for | | | | |
| eligibility to contest the nomination of the | | | | | |
| (Name o | of Political Party and Electoral District). | | | | |
| | | | | | |
| X | | | | | |
| Signature of CFO or Party Designate | Date | | | | |