



ELECTIONS BC
A non-partisan Office of the Legislature

INITIATIVE ADVERTISING SPONSOR

930 (05/06)

APPLICATION FOR REGISTRATION

PLEASE PRINT IN BLOCK LETTERS OR TYPE
SEE REVERSE SIDE FOR INSTRUCTIONS

NAME OF INITIATIVE		
FULL NAME OF APPLICANT / ORGANIZATION		
USUAL NAME OF ORGANIZATION (IF DIFFERENT FROM ABOVE)		
FULL ADDRESS OF APPLICANT		PHONE NO. ()
CITY / TOWN		FAX NO. ()
POSTAL CODE	CONTACT NAME	
COMMUNICATIONS ADDRESS OF APPLICANT (IF DIFFERENT FROM ADDRESS ABOVE) †		
CITY / TOWN		POSTAL CODE
† Any notice required or authorized under the <i>Recall and Initiative Act</i> is deemed to be given if it is delivered to this address.		
Principal officers, or if none, principal members of the organization (if more space is needed, attach additional sheets)		
NAME OF PRINCIPAL OFFICER / MEMBER	NAME OF PRINCIPAL OFFICER / MEMBER	
NAME OF PRINCIPAL OFFICER / MEMBER	NAME OF PRINCIPAL OFFICER / MEMBER	
I, the undersigned, swear [or solemnly affirm] that:		
(a) I am authorized to act on behalf of the above-mentioned applicant;		
(b) the applicant is not prohibited by Section 99 of the <i>Recall and Initiative Act</i> from being registered;		
(c) the applicant does not intend to sponsor initiative advertising for any purpose related to circumventing the provisions of the <i>Recall and Initiative Act</i> limiting the value of initiative expenses that may be incurred by an authorized participant; and,		
(d) to the best of my knowledge, information and belief, the contents of this declaration are complete and accurate.		
SIGNATURE OF APPLICANT OR PRINCIPAL OFFICER / MEMBER	SIGNATURE OF APPLICANT OR PRINCIPAL OFFICER / MEMBER	
PRINTED NAME OF APPLICANT OR PRINCIPAL OFFICER / MEMBER	PRINTED NAME OF APPLICANT OR PRINCIPAL OFFICER / MEMBER	
SWORN [OR SOLEMNLY AFFIRMED] BEFORE ME		SWORN [OR SOLEMNLY AFFIRMED] BEFORE ME
AT:	DATE: (YYYY / MM / DD)	AT:
		DATE: (YYYY / MM / DD)
COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA ★		COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA ★
★ This includes the Chief Electoral Officer, notaries public, barristers, solicitors and Government Agents.		
WARNING: Signing a false statement is a serious offence and is subject to significant penalties. [Section 162 of the <i>Recall and Initiative Act</i>]		
CHIEF ELECTORAL OFFICE USE ONLY		
APPLICATION RECEIVED (YY / MM / DD)	ACCEPTED / REJECTED (YY / MM / DD)	REGISTRATION NUMBER

ORIGINAL- CHIEF ELECTORAL OFFICE
COPY - APPLICANT

SEND TO: Chief Electoral Officer, Elections BC
Mail: PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6
Location: 333 Quebec Street, Victoria
Phone: (250) 387-5305 or toll-free 1-800-661-8683
Facsimile: (250) 387-3578 or toll-free 1-866-466-0665
Email: electionsbc@elections.bc.ca

INITIATIVE ADVERTISING SPONSOR APPLICATION FOR REGISTRATION – FORM 930

Recall and Initiative Act Section 97
PLEASE PRINT IN BLOCK LETTERS OR TYPE

This is the application form for registration of an initiative petition or initiative vote advertising sponsor. It requests basic information about the applicant and a declaration for completion by the applicant. An applicant may be either an individual or an organization.

1. **Name of initiative:** Identify the initiative petition or initiative vote in relation to which you wish to register as a sponsor.
2. **Full name of applicant/organization:** Enter the full name of the applicant. If the applicant is an organization, enter the full name of the organization.
3. **Usual name of organization (if different from above):** If the applicant is an organization with a usual name different from the full name entered above, enter the usual name of the organization in this box.
4. **Full address of applicant:** Enter the full address of the applicant. Complete the **city/town** name and **postal code** in the appropriate spaces.
5. **Phone number:** Enter a phone number at which the applicant can be contacted.
6. **Fax no.:** Enter a fax number at which the applicant may be contacted. This is voluntary information.
7. **Contact name:** An applicant contact name may be entered in this space. This may be particularly useful if the applicant is an organization. This is voluntary information.
8. **Communications address of applicant (if different from address above):** Enter an address at which communications may be delivered to the applicant. Complete the **city/town** name and **postal code** in the appropriate spaces. If communications may be sent to the address entered under **full address of applicant** above, this field need not be completed.
9. **Name of principal officer/member:** If the applicant is an organization, print the name of each principal officer of the organization or, if there are no principal officers, the principal members of the organization. Attach an additional sheet if more space is needed. If the applicant is an individual, do not complete this area.
10. **Signature of applicant or principal officer/member:** This declaration must be signed by the applicant if the applicant is an individual. If the applicant is an organization, the declaration must be signed by two principal officers of the organization or, if there are no principal officers, by two principal members of the organization. All signatures must be witnessed by a commissioner for taking affidavits for British Columbia. Signing a false statement is a serious offence and is subject to significant penalties under Section 162 of the *Recall and Initiative Act*.
11. **Printed name of applicant or principal officer/member:** If the applicant is an organization, print the name of the principal officer or principal member who signed the declaration on behalf of the organization.
12. **Sworn [or solemnly affirmed] before me:** This section is completed by a commissioner for taking affidavits for British Columbia. This includes the Chief Electoral Officer, notaries public, barristers, solicitors, and government agents.
13. **Chief Electoral Office use only:** The bottom section on this form is for Chief Electoral Office use only. Please do not complete this section.

