

Election Finances Division

51 ROLARK DRIVE TORONTO, ONTARIO M1R 3B1

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

P-4 Petition to Register a Political Party Disponible aussi en français.

For Office Use Only					

Name of Political Party: Alliance Party of Ontario

Please read all the information on the form before signing.

For the purpose of enabling the above-named political party to apply to the Chief Electoral Officer of Ontario for registration in the register of political parties maintained pursuant to the *Election Finances Act*, I hereby:

- 1) certify that as of the date hereof, I am eligible to vote in an election to elect a member to serve in the Legislative Assembly of Ontario*, and
- 2) endorse the registration of the above-named political party.

Endorsee Information and Signature					
First Name:	Last Name:				
Address:		=			
City:	Postal Code:		Tel.:		
Email:					
Signature of Endorsee:			Date:		
First Name:		Last Name:			
Address:		•			
City:	Postal Code:		Tel.:		
Email:					
Signature of Endorsee:			Date:		
First Name:		Last Name:			
Address:		•			
City:	Postal Code:		Tel.:		
Email:			_		
Signature of Endorsee:			Date:		

- * Section 15 of the *Election Act* states that to be eligible to vote in a provincial election, a person must be:
 - (i) at least eighteen years of age;
 - (ii) a Canadian citizen;
 - (iii) a resident of Ontario; and
 - (iv) not otherwise prohibited by law.