

**PLEASE PRINT IN BLOCK LETTERS AND SIGN WHERE REQUIRED
SEE REVERSE SIDE FOR INSTRUCTIONS**

FULL NAME OF REGISTERED SPONSOR			
USUAL NAME OF ORGANIZATION (IF DIFFERENT FROM ABOVE)			
FULL ADDRESS OF REGISTERED SPONSOR			PHONE NO.
CITY / TOWN	PROVINCE	POSTAL CODE	CONTACT NAME
EMAIL (OPTIONAL)			*Any notice required or authorized under the <i>Election Act</i> is deemed to be given if it is delivered to this address.
COMMUNICATIONS ADDRESS OF SPONSOR (IF DIFFERENT FROM ADDRESS ABOVE)*			
CITY / TOWN	PROVINCE	POSTAL CODE	

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, declare that:

- (a) I am authorized to act on behalf of the above-mentioned sponsor, if the sponsor is an organization;
- (b) I hereby apply for deregistration as a third party sponsor; and,
- (c) to the best of my knowledge, information and belief, the contents of this document are complete and accurate.

PRINTED NAME OF SPONSOR OR PRINCIPAL OFFICER / MEMBER	PRINTED NAME OF PRINCIPAL OFFICER / MEMBER
SIGNATURE OF SPONSOR OR PRINCIPAL OFFICER / MEMBER	SIGNATURE OF PRINCIPAL OFFICER / MEMBER
DATE: (YYYY / MM / DD)	DATE: (YYYY / MM / DD)

WARNING: Signing a false statement is a serious offence and is subject to significant penalties.

ELECTIONS BC USE	
DATE RECEIVED (YYYY / MM / DD)	REGISTRATION NUMBER

THIRD PARTY SPONSOR DEREGISTRATION – FORM 431

This is the application form for voluntary deregistration of a registered third party sponsor. Voluntary deregistration does not preclude a sponsor from reregistering at a later date.

Full name of registered sponsor: Enter the full name of the sponsor. If the sponsor is an organization, enter the full name of the organization.

Usual name of organization (if different from above): If the sponsor is an organization with a usual name different from the full name entered above, enter the usual name of the organization in this field.

Full address of registered sponsor: Enter the full address of the sponsor. Complete the **city/town, province** and **postal code** in the appropriate fields. Contact information is available for public inspection and will be published on the Elections BC website.

Phone number: Enter a phone number at which the sponsor can be contacted.

Contact name: A sponsor contact name can be entered in this field. This is useful if the sponsor is an organization and is voluntary information.

Email: Enter an email address at which the sponsor can be contacted. This is voluntary information.

Communications address of sponsor (if different from address above): Enter an address at which communications can be delivered to the sponsor. Complete the **city/town, province** and **postal code** in the appropriate fields. If communications can be sent to the address entered under **full address of registered sponsor** above, this field need not be completed.

Printed name of sponsor or principal officer/member: If the sponsor is an organization, print the name of each principal officer or principal member who signed the document on behalf of the organization.

Signature of sponsor or principal officer/member: This declaration must be signed by the sponsor if the sponsor is an individual. If the sponsor 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. Signing a false statement is a serious offence and is subject to significant penalties under section 266 of the *Election Act*.

**For more information
Phone toll-free 1-800-661-8683 / TTY 1-888-456-5448**

or contact
Elections BC
Mailing address: PO Box 9275 Stn Prov Govt, Victoria, BC V8W 9J6
Phone: 250-387-5305
Fax: 250-387-3578
Toll-free Fax: 1-866-466-0665
Email: electoral.finance@elections.bc.ca
Website: www.elections.bc.ca