

INITIATIVE PETITION OPPONENT APPLICATION - ORGANIZATION

PLEASE PRINT IN BLOCK LETTERS AND SIGN WHERE REQUIRED

TITLE OF INITIATIVE						
FULL NAME OF APPLICANT ORGAN	NIZATION					
USUAL NAME OF APPLICANT ORGA	ANIZATION					
FULL ADDRESS OF ORGANIZATION				CONTACT NAME		
CITY/TOWN	PROVINCE	POSTAL CODE		PHONE	FAX	
				EMAIL		
COMMUNICATIONS ADDRESS OF ORGANIZATION (IF DIFFERENT FROM ADDRESS ABOVE) *				CONTACT NAME		
CITY/TOWN	PROVINCE	POST	AL CODE	PHONE	FAX	
 ★ Any notice required or authorized under the Recall and Initiative Act is deemed to be given if it is delivered to this address. 				EMAIL		
NAME OF INDIVIDUAL PROPOSED	TO ACT AS FINANCIAL AGENT			Application for Financial Acte for this application to be	gent must be filed with the Chief	
					more details about the application	
			process.			
Principal officers, or if none, principal members of the organization (If more space is INAME OF PRINCIPAL OFFICER NAME OF			needed, attach additional sheets) PRINCIPAL OFFICER			
NAME OF PRINCIPAL OFFICER			NAME OF PRINCIPAL OFFICER			
This organization enposes the abo	ove named initiative, and is not	disqualified	from registerin	a as an annonant under t	the Recall and Initiative Act	
This organization opposes the above-named initiative, and is not disqualified from regis SIGNATURE OF PRINCIPAL OFFICER SIGNATURE OF PRINCIPAL OFFICER				JRE OF PRINCIPAL OFFICER		
DATE: (YYYY/MM/DD)			DATE: (YYYY/MM/DD)			
his application must be filed with	the Chief Electoral Officer with	in 30 days	after the notice	of approval in principle fo	r the petition is published in the	
Sazette. VARNING: Signing a false staten	nent is a serious offence and is	subject to s	significant penal	Ities [section 162 of the R	ecall and Initiative Act].	
CHIEF ELECTORAL OFFICE USE ONLY						
PETITION NUMBER	APPLICATION REC'D (YYYY/		1	EJECTED (YYYY/MM/DD)	OPPONENT NUMBER	
REASON REJECTED			1		1	