

APPENDIX Form 42



DGE-42-VA (04-01)
Election Act
(R.S.Q., c. E-3.3, s. 239)

Nomination paper *Version française disponible sur demande*

Identification of candidate

<p>* Given name <input style="width: 95%;" type="text"/></p>	IMPORTANT <small>The opposite given name and surname will be entered on the ballot paper</small>
<p>* Surname <input style="width: 95%;" type="text"/></p>	
<p><input type="checkbox"/> Where applicable, I have appended an affidavit to the effect that my ordinary name and surname are those under which I am commonly known in political, professional and social life.</p>	
<p>* Date of birth <input style="width: 100%;" type="text"/></p> <p style="font-size: small; text-align: center;">Year Month Day</p>	
<p>* Occupation <input style="width: 95%;" type="text"/></p>	
<p>* Address <input style="width: 95%;" type="text"/></p> <p style="font-size: small; text-align: center;">Number Street Municipality Postal code</p>	
<p>Optional <input style="width: 95%;" type="text"/></p> <p style="font-size: small; text-align: center;">Home phone no. Office phone no. E-mail</p>	

Status

<p>* Membership of an authorized party <input style="width: 95%;" type="text"/></p> <p style="font-size: small; text-align: center;">(Name of the party as authorized)</p>
<p><input type="checkbox"/> I am appending hereto a letter from the leader of the authorized party who recognizes me as being a candidate of that party</p>
<p>OR</p>
<p>* Wish that the particular "Independent" appear on the ballot paper</p>
<p><input type="checkbox"/> Yes in { <ul style="list-style-type: none"> <input type="checkbox"/> French <input type="checkbox"/> English <input type="checkbox"/> French/English <input type="checkbox"/> English/French </p>
<p><input type="checkbox"/> No</p>

Official agent

<p>* Given name <input style="width: 95%;" type="text"/></p>	
<p>* Surname <input style="width: 95%;" type="text"/></p>	
<p>* Address <input style="width: 95%;" type="text"/></p> <p style="font-size: small; text-align: center;">Number Street Municipality Postal code</p>	
<p>Optional <input style="width: 95%;" type="text"/></p> <p style="font-size: small; text-align: center;">Home phone no. Office phone no. E-mail</p>	
<p>* Signature of the official agent <input style="width: 95%;" type="text"/></p>	

Identification of the mandataries

<p>* Given name <input type="text"/></p> <p>* Surname <input type="text"/></p> <p>* Address _____ Number Street Municipality Postal code</p> <p>Optional <input type="text"/> <input type="text"/> _____ Home phone no. Office phone no. E-mail</p> <p>* Signature and initials of the mandatary: _____</p>
<p>* Given name <input type="text"/></p> <p>* Surname <input type="text"/></p> <p>* Address _____ Number Street Municipality Postal code</p> <p>Optional <input type="text"/> <input type="text"/> _____ Home phone no. Office phone no. E-mail</p> <p>* Signature and initials of the mandatary: _____</p>
<p>* Given name <input type="text"/></p> <p>* Surname <input type="text"/></p> <p>* Address _____ Number Street Municipality Postal code</p> <p>Optional <input type="text"/> <input type="text"/> _____ Home phone no. Office phone no. E-mail</p> <p>* Signature and initials of the mandatary: _____</p>
<p>* Given name <input type="text"/></p> <p>* Surname <input type="text"/></p> <p>* Address _____ Number Street Municipality Postal code</p> <p>Optional <input type="text"/> <input type="text"/> _____ Home phone no. Office phone no. E-mail</p> <p>* Signature and initials of the mandatary: _____</p>

* Mandatory information

Declaration of the candidate

*** I have appended hereto**

my birth certificate

OR one of the following identification documents

- my Québec health-insurance card
- my Certificate of Canadian citizenship
- my Québec driver's licence
- my Canadian passport
- a copy of the Order changing my name

AND

a photograph showing a full face view of me from the shoulders, bareheaded, against a plain light background and printed on single thickness paper measuring approximately 13 cm X 13 cm, in accordance with section 6 of the Nomination Regulation, and signed on the back by 2 electors from the electoral division who know me and attest to my identity.

*** I, _____, submit my candidacy**

in the electoral division of _____,

and state that : 1. I am a qualified elector within the meaning of section 1 of the Election Act;

2. I have not been disqualified within the meaning of section 235 of the Election Act.

*** In witness whereof, I have signed**

at _____, on _____ 20_____.

Candidate's signature

* Mandatory information

Supporting signatures

We, the undersigned, electors entered on the list of electors of the electoral division of _____, hereby support the candidacy of:

Given name _____ Surname _____

for the election of a Member of the National Assembly for said electoral division.

The elector who supports a nomination paper must be entered on the list of electors for the electoral division for which the signature is collected.

Legal provisions

According to section 245 of the Election Act, the returning officer shall verify if the persons supporting the candidacy are indeed entered on the list of electors for the electoral division.

Penalties (s. 552 (2) (3) of the Election Act) Every person who supports a nomination paper, when he is not an elector whose name is entered on the list of electors for the electoral division for which the nomination paper is filed and every person who uses the signature of others as support on a nomination paper is liable to:

1° A fine of \$500 to \$10,000 for a first offence;

2° A fine of \$3,000 to \$30,000 for every subsequent offence within five years.

Space reserved for Verification	WRITE LEGIBLY AND IN BLOCK LETTERS YOUR SURNAME, GIVEN NAME AND ADDRESS AS THEY ARE ENTERED ON THE LIST OF ELECTORS			Initials of the person who collects the signatures
	No.	Surname (at birth)	Given name Address (of domicile)	
	1			
	2			
	3			
	4			
	5			
	6			
	7			
	8			
	9			
	10			

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Spaces reserved for nomination	No.	WRITE LEGIBLY AND IN BLOCK LETTERS YOUR SURNAME, GIVEN NAME AND ADDRESS AS THEY ARE ENTERED ON THE LIST OF ELECTORS			Signature	In case of the presence of the collector or the Signatures
		Surname (at birth)	Given name	Address (of domicile)		
	11					
	12					
	13					
	14					
	15					
	16					
	17					
	18					
	19					
	20					

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	No.	Surname (at birth)	Given name Address (of domicile)		Municipality
	21				
	22				
	23				
	24				
	25				
	26				
	27				
	28				
	29				
	30				

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Space reserved for nomination	No.	Surname (at birth)	Given name	Address (of domicile)	Municipality	Signature	Initials of the elector who collects the signatures
	31						
	32						
	33						
	34						
	35						
	36						
	37						
	38						
	39						
	40						

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		Surname (at birth)	Given name	Address (of domicile) Municipality	
	41				
	42				
	43				
	44				
	45				
	46				
	47				
	48				
	49				
	50				

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Given name	_____
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		Surname (at birth)	Given name	Address (of domicile) Municipality	
	51				
	52				
	53				
	54				
	55				
	56				
	57				
	58				
	59				
	60				

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Surname	_____

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		Surname (dit birth)	Given name	Address (of domicile)		Municipality	Signature
	61						
	62						
	63						
	64						
	65						
	66						
	67						
	68						
	69						
	70						

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		Surname (at birth)	Given name Address (of domicile) Municipality		
	71				
	72				
	73				
	74				
	75				
	76				
	77				
	78				
	79				
	80				

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	Surname (at birth)	Given name	Address (of domicile)		
121					
122					
123					
124					
125					
126					
127					
128					
129					
130					

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		Surname (at birth)	Given name	Address (of domicile)		
	131					
	132					
	133					
	134					
	135					
	136					
	137					
	138					
	139					
	140					

Receipt

I, _____, returning officer, have received this nomination paper. All of the required documents are appended hereto. Subject to the verification of the entry on the list of electors of the electors supporting this nomination paper, in all appearances it meets the requirements of the Election Act.

On _____ 20 ____.

Signature of the returning officer

Notice of conformity

I certify that at least one hundred electors supporting this nomination paper are indeed entered on the list of electors for the electoral division and that this nomination paper meets the requirements of the Election Act.

On _____ 20 ____, at _____ o'clock.

Signature of the returning officer