

Appendix C

FORM R

[Subsections 96(2) and 121 (2) of the Act]

Mail-In Ballot Voter's Registration Form and Poll Book

Name _____ (Print)

Address: _____ (Print)

Election held in:

RURAL MUNICIPALITY of WILLOW BUNCH (Municipality)	
Division No.	(If applicable)

Complete the following by placing an "X" in the box to the right of each statement that is correct:

- 1 I am a Canadian citizen.
- 2 I am the full age of 18 years or will attain the full age of 18 years on or before election day.
- 3 I have not already voted at this election.

<p>Municipal Voters - Rural Municipalities only</p> <p>3 On the day of the election, I: (complete one)</p> <ul style="list-style-type: none"> <input type="checkbox"/> (a) have resided in the rural municipality for at least three consecutive months immediately preceding the day of the election; <input type="checkbox"/> (b) am the registered owner, (or purchaser pursuant to a bona fide agreement for sale), of land in the rural municipality; <input type="checkbox"/> (c) am assessed with respect to land in the rural municipality pursuant to a lease, licence, permit or contract in agreement with the registered owner; <input type="checkbox"/> (d) am assessed with respect to an improvement in the rural municipality; <input type="checkbox"/> (e) am the holder of a permit in the rural municipality with respect to a trailer or mobile home; <input type="checkbox"/> (f) am the spouse of a person described in clause (b), (c), (d) or (e); <input type="checkbox"/> (g) am the chief executive officer of a duly incorporated co-operative, corporation or religious association that is assessed on the last revised assessment roll with respect to property in the rural municipality that is not exempt from taxation.
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DECLARATION of ABSENTEE VOTER:

I request that a mail-in ballot be issued to me.

Address where the mail-in ballot is to be mailed: _____

Applicant Phone Number: _____ Applicant Email: _____

I declare that the information given by me with respect to the above statements is true in all respects.

Dated this _____ day of _____, 2020

Witness:

(Returning Officer, deputy returning officer or eligible witness)

(Voter)

Mail-In Ballot Register	Initials		Initials
Date Application Accepted:		Ballot Accepted	
Date Mail-In Ballot Kit Mailed/Provided		Ballot Not Accepted	
Date Mail-In Ballot Received		Ballot Spoiled	