

ELECTION FINANCES AND CONTRIBUTIONS DISCLOSURE ACT

REGISTRATION OF A CONSTITUENCY ASSOCIATION

2019 ELECTORAL DIVISION BOUNDARIES FORM CA-R-19-01

OFFICE USE ONLY

INITIAL REGISTRATION UPDATE TO REGISTRATION

NAME (OF REGISTERED POLITICAL PARTY		NAME OF EL	ECTORAL DIVISION			ED No.	
	FINANCIAL OFFICER (CFO) First and Last Name							
FIEIIX	Prefix First and Last Name			Email Address				
Street A	Address or P.O. Box							
		_						
City / Town / Village / Municipality Prov. AB		Postal Code	Primary Phone	hone Alternate Phone		hone		
	IPAL OFFICER (PRESIDENT)							
Prefix	Prefix First and Last Name			Email Address				
Street A	Address or P.O. Box							
City / To	own / Village / Municipality	Prov.	Postal Code	Primary Phone	Alte	ernate P	hone	
		AB						
	TION RECORDS ARE MAINTAINED		IMUNICATIONS AD		IF DIFFEREN	T FROM	CFO'S ADDRESS	
Prefix	First and Last Name			Email Address	Email Address			
Street A	Address or P.O. Box							
City / To	own / Village / Municipality	Prov.	Postal Code	Primary Phone	Alte	ernate P	hone	
		AB		-				
	ICIAL INSTITUTION							
Name								
Street Address or P.O. Box		City / Town / Vill	- 5 5		rov. Postal Code			
					AE	3		
Name(s	s) of Signing Officer(s)							
ASSE	TS AND LIABILITIES - ONLY COMPLET		AL REGISTRATION or RE	E-REGISTRATION				
	No Assets and/or Liabilities exist as							
	Assets and/or Liabilities exist.		<u>.</u>					
-								
Prin	t Name of Constituency Association CFO		Constituency /	Constituency Association CFO's Signature			Date	
ENDO	DRSEMENT - SIGNATORY MUST BE ON R	ECORD WIT	H ELECTIONS ALBERTA	۱.				
FOF	R INITIAL REGISTRATION or RE-REGIST	RATION						
Prin	Print Name of Authorized Political Party Official Political Party Official's Signature Date							
	R UPDATE TO REGISTRATION							
Print Name of Constituency Association President or CFO			Constituency	Constituency Association President or CFO's Signature			Date	
ACCE	PTANCE BY ELECTIONS ALBERT	Ά						
Print Name of Elections Alberta Representative			Elections Albe	Elections Alberta Representative's Signature			Date	
	nstituency association must receive written update to registration, the constituency ass							
	ITIAL REGISTRATION or RE-REGISTRA							
Suite 10	00, 11510 Kingsway NW, Edmonton, AB T	5G 2Y5						
	PDATE TO REGISTRATION, FAXED OR \$ 780.427.7191 Fax: 780.422.2900 Email:				OFFICE US			
					UT FICE US			