

Election Compliance Audit Committee Application Form

Name: _____

Street
Address: _____

Postal Code: _____ Home Telephone: _____ Bus. Telephone: _____

1. Briefly list the qualifications and experience you have that would prepare you for participation on the Municipal Election Compliance Audit Committee.

2. Briefly describe what interests you about being a member of the Election Compliance Audit Committee.

3. The Committee shall be composed of three members and shall not include:

- Employees or Officers of the municipalities of Hearst, Mattice - Val Coté, Opatatika, Val Rita - Harty, Kapuskasing, Moonbeam, Fauquier - Strickland and Smooth Rock Falls.
- Members of municipal Council of Hearst, Mattice - Val Coté, Opatatika, Val Rita - Harty, Kapuskasing, Moonbeam, Fauquier - Strickland and Smooth Rock Falls.
- Candidates in the 2010 Municipal Election or any by-elections during the term of Council or the School Board.

Are you any of the aforementioned?

YES NO

4. Would you have any conflicts of interests or potential conflicts of interests if you were appointed?

YES NO

If yes, please describe the general nature of the conflict (e.g. providing financial assistance or legal counsel to any candidate running for council).

PLEASE RETURN THIS APPLICATION FORM AND RESUME TO THE ATTENTION OF THE CLERK BY 4:00 PM SEPTEMBER 16, 2022

Personal information is being collected under the authority of the Municipal Elections Act, 1996. Pursuant to S.88 of the Municipal Elections Act, 1996, this document is a public record, despite anything in the Municipal Freedom of Information and Protection of Privacy Act (1990), and until its destruction may be inspected by any person at the Clerk's Office at a time when the office is open. Questions about this collection can be directed to the Clerk.

Signature of Applicant

Date

For further information, please contact the clerk in your municipality.