

PLEASE PRINT IN BLOCK LETTERS AND SIGN WHERE REQUIRED
SEE REVERSE SIDE FOR INSTRUCTIONS

Please check one: APPLICATION FOR NEW REGISTRATION <input type="checkbox"/>						NOTICE OF CHANGE <input type="checkbox"/>									
FULL NAME OF SPONSOR															
USUAL NAME OF ORGANIZATION (IF DIFFERENT FROM ABOVE)															
ADDRESS						PHONE NO.									
CITY / TOWN				PROVINCE		POSTAL CODE		CONTACT NAME							
EMAIL						*Any notice required or authorized under the <i>Election Act</i> is deemed to be given if it is delivered to this address.									
COMMUNICATIONS ADDRESS OF SPONSOR (IF DIFFERENT FROM ADDRESS ABOVE)*															
CITY / TOWN				PROVINCE								POSTAL CODE			
Principal officers, or if none, principal members of the organization (if more space is needed, attach additional sheets)															
FULL NAME OF PRINCIPAL OFFICER						FULL NAME OF PRINCIPAL OFFICER									
RESIDENTIAL ADDRESS OF PRINCIPAL OFFICER						RESIDENTIAL ADDRESS OF PRINCIPAL OFFICER									
CITY / TOWN			PROVINCE		POSTAL CODE	CITY / TOWN			PROVINCE		POSTAL CODE				
EMAIL			PHONE NUMBER			EMAIL			PHONE NUMBER						
<input type="checkbox"/> Keep my contact information private.						<input type="checkbox"/> Keep my contact information private.									
I, the undersigned, declare that I, or the above named organization:															
(a) is not prohibited by section 247 of the <i>Election Act</i> from being registered for failure to file an election advertising disclosure report;															
(b) will not sponsor election advertising for any purpose related to circumventing the provisions of the <i>Election Act</i> limiting the value of election expenses that may be incurred by a candidate or registered political party;															
(c) will not sponsor election advertising on behalf of or together with a candidate, registered political party, registered constituency association, or an appointed official agent, financial agent or deputy financial agent;															
(d) will not act in collusion with a candidate or a registered political party, including sharing information to influence third party election advertising;															
(e) if the sponsor is an organization, I am authorized to act on behalf of the above-mentioned sponsor; and															
(f) to the best of my knowledge, information and belief, the contents of this declaration are complete and accurate.															
PRINTED NAME OF SPONSOR OR PRINCIPAL OFFICER / MEMBER						PRINTED NAME OF PRINCIPAL OFFICER / MEMBER									
SIGNATURE OF SPONSOR OR PRINCIPAL OFFICER / MEMBER						SIGNATURE OF PRINCIPAL OFFICER / MEMBER									
DATE: (YYYY / MM / DD)						DATE: (YYYY / MM / DD)									
WARNING: Signing a false statement is a serious offence and is subject to significant penalties.															

ELECTIONS BC USE	
DATE RECEIVED (YYYY / MM / DD)	REGISTRATION NUMBER

THIRD PARTY SPONSOR REGISTRATION – FORM 422

PLEASE PRINT IN BLOCK LETTERS AND SIGN WHERE REQUIRED

This is the application to register or to update the registration information for a third party sponsor. It requests basic information and a declaration from the sponsor. A sponsor may be either an individual or an organization.

Full name of sponsor: Enter the full name of the third party sponsor. If the sponsor is an organization, enter the full name of the organization.

Usual name of organization (if different from above): If the sponsor is an organization with a usual name different from the full name entered above, enter the usual name of the organization in this box.

Address: Enter the full address of the applicant. Complete the **city / town, province** and **postal code** in the appropriate spaces.

Phone number: Enter a phone number at which the sponsor can be contacted.

Contact name: A contact name may be entered in this space. This is useful if the sponsor is an organization. This is voluntary information.

Email: Enter an email address at which the sponsor can be contacted.

Communications address (if different from address above): Enter an address at which communications may be delivered to the applicant. Complete the **city / town** name and **postal code** in the appropriate spaces. If communications may be sent to the address entered above, this field need not be completed.

Name of principal officer / member: If the sponsor is an individual, do not complete this area. If the sponsor is an organization, print the name of each principal officer of the organization or, if there are no principal officers, the principal members of the organization. Attach an additional sheet if more space is needed. A minimum of two principal officers or principal members must be identified. Each principal officer is required to provide a residential address, phone number, and email address. If the principal officer would prefer to have their information obscured on public inspection copies, they may check the box below their contact information. A residential address cannot be a PO Box.

An individual or organization that is registered, or required to be registered, as a third party sponsor must be independent of registered political parties, registered constituency associations, candidates, official agents, financial agents and deputy financial agents. An individual or organization may be subject to administrative monetary penalties if they sponsor election advertising on behalf of or together with any of these entities.

Printed name of sponsor or principal officer / member: If the sponsor is an organization, print the name of the principal officer or principal member who signed the declaration on behalf of the organization.

Signature of sponsor or principal officer / member: This declaration must be signed by the sponsor if the sponsor is an individual. If the sponsor is an organization, the declaration must be signed by two principal officers of the organization or, if there are no principal officers, by two principal members of the organization. Signing a false statement is a serious offence and is subject to significant penalties under section 266 of the *Election Act*.

For more information
Phone toll-free 1-800-661-8683 / TTY 1-888-456-5448

or contact
Elections BC
Mailing address: PO Box 9275 Stn Prov Govt, Victoria, BC V8W 9J6
Phone: 250-387-5305
Fax: 250-387-3578
Toll-free Fax: 1-866-466-0665
Email: electoral.finance@elections.bc.ca
Website: elections.bc.ca