

FORM R

Voter's Registration Form and Poll Book – Mail-in Ballot

	Name:						
			(Prir	nt)			
	Mailing/Civic Add	ress:	(Prin	<u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Election held in:	THE T	OWN OF	<i>'</i>	Ε		
Complete the	following by placin	g an X in the box	to the lef	t of each state	ement that is correc	et:	
2) I am t	Canadian citizen. he full age of 18 yea not already voted a		he full age of	18 years on c	or before Election d	lay.	
Municipal Vo	iters						
4) On the day	of the Election:						
a) I: (place an "X" in one of the following boxes for clause a)							
i i	i) have resided for at least three consecutive months immediately preceding the day of the Election in or on land now in the Town of Balgonie; or						
 ii) have been the owner for at least three consecutive months immediately preceding the day of the Election of assessable land situated in the Municipality or land now in the Municipality; and b) I have resided in Saskatchewan for at least six consecutive months immediately preceding the day 							
of the Election.							
I declare that I am a voter entitled to vote in the Town of Balgonie.							
I decla	re that the information	on given by me v	with respect to	the above sta	atements is true in	all respects.	
Dated	this day	of		, 20			
(Name of Voter)			(Signature o	f Voter)			
(Name of Witnes	s)		(Signature o	f Witness)			
MAIL-IN B	ALLOT DATE INFO	RMATION	VOTED WI	TH RESPECT	ТО		
Date of acceptance	Date kit provided	Date ballot received		Councillor	Objection		

ENTRY NO. _____

Schedule B APPENDIX A FORM C

[Section 92 of the Act and clause 18(1)(a) of the Regulations]

Declaration of Person Requesting Mail-in Ballot

Declaration of Absentee Voter:

Iamqualified to vote in the Town of Balgonie.

I have completed a Voter's Registration Form; and

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

I make this solemn declaration conscientiously, believing it to be true and knowingthat it is of the same force and effect as if made under oath/affirmation and by virtue of the *Canada Evidence Act*.

Date: _____, 20_____.

(Name of Person Requesting Mail-in ballot)

(Signature of Person Requesting Mail-in ballot)

(Phone Number or email address)

I have witnessed the signature of the person named above and I am satisfied the person's identity has been established pursuant to *The Local Government Election Act, 2015* and the regulations.

Dated this ______ day of ______, 2024.

(Signature of Returning Officer or Person Authorized by Bylaw to Witness the Signature of a Person Requesting a Mail-in ballot)

(Name of Witness)

(Witness' Phone Number or email address)