

ELECTORAL AND REFERENDUM COMPLAINT FORM

INSTRUCTIONS

This form must be submitted in person to the offices of the Independent Electoral Commission (IEC) or by email at elections.chief@sfss.ca.

COMPLAINANT CONTACT INFORMATION AND SIGNATURE

Name	
Student Number	
Preferred Phone Number	
Preferred Email Address	

Signature _____

Date _____

COMPLAINT

Please provide as much detail as possible. Include the regulation reference number you believe was breached.

<p>Electoral Regulation <i>Please indicate the electoral regulation you believed was breached.</i></p>	
<p>Description <i>Please provide a clear description of the event you believe was a breach of electoral regulation.</i></p>	

<p>Material Evidence <i>Please provide a list of the pieces of material evidence you have attached in support of your complaint.</i></p>	<ul style="list-style-type: none">•••
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IEC DECISION

Please provide as much detail as possible. Include the regulation reference number you believe was breached.

<p>Finding <i>State whether or not the complaint was deemed founded.</i></p>	<p><input type="checkbox"/> Founded <input type="checkbox"/> Not founded</p>
<p>Infraction Stage <i>Indicate the stage in the disciplinary process.</i></p>	<p><input type="checkbox"/> Stage 1 <input type="checkbox"/> Stage 2 <input type="checkbox"/> Stage 3</p>
<p>Penalty <i>Please indicate the penalty applied. ensure the penalty is consistent with the infraction schedule in the elections and referenda policies.</i></p>	<p><input type="checkbox"/> Censure (written statement to candidate in question) <input type="checkbox"/> Fine (reduction of campaign expense reimbursement allocation by half) <input type="checkbox"/> Disqualification</p>
<p>Rationale <i>Please provide a clear, succinct rationale for the IEC finding.</i></p>	

CHIEF COMMISSIONER SIGNATURE

Printed Name _____

Signature _____

Date _____