



ELECTION FINANCES AND CONTRIBUTIONS DISCLOSURE ACT

LEADERSHIP CONTEST STATEMENT

FORM LC-LCS-01

OFFICE USE ONLY

NAME OF REGISTERED POLITICAL PARTY

DATE OF OFFICIAL CALL OF LEADERSHIP CONTEST

DATE OF CLOSE OF NOMINATIONS (OPTIONAL)

DATE OF LEADERSHIP VOTE(S)

PARTY ENDORSEMENT DEADLINE (10 CALENDAR DAYS AFTER DATE OF FINAL LEADERSHIP CONTESTANT VOTE)

List fee and/or deposit amount(s) required to be paid by leadership contestant as a condition for entering the contest. Also list the estimated cost for holding the leadership contest.

Amount of fee (if applicable): \$ _____

Amount of deposit (if applicable): \$ _____

Estimated cost to hold the leadership contest: \$ _____

CHIEF FINANCIAL OFFICER SIGNATURE

This leadership contest statement is hereby submitted by the Chief Financial Officer of the registered political party named above.

_____ Print Name

_____ Signature

_____ mm / dd / yyyy

ACCEPTANCE BY ELECTIONS ALBERTA

_____ Authorized Signature

_____ mm / dd / yyyy

FORWARD SIGNED ORIGINAL TO ELECTIONS ALBERTA

Suite 100, 11510 Kingsway NW, Edmonton, AB T5G 2Y5 780.427.7191

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ENTERED: