

Please note: Text does not include amendments made by N.S. Reg. 105/2012

## Municipal Elections Act Forms

prescribed under subsection 167(1) of the

### *Municipal Elections Act*

R.S.N.S. 1989, c. 300

O.I.C. 97-469, N.S. Reg. 84/97

as amended up to N.S. Reg. 323/2008

July 10, 2008

Consolidation prepared by  
the Registry of Regulations  
Halifax, Nova Scotia

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**Municipal Elections Act Forms**  
**prescribed under subsection 167(1) of the**  
***Municipal Elections Act***  
**R.S.N.S. 1989, c. 300**  
**O.I.C. 97-469 (July 15, 1997), N.S. Reg. 84/97**  
**as amended up to N.S. Reg. 323/2008 (July 10, 2008)**

**Form 1**  
**Sections 4, 8, 33**  
**Oath or Affirmation of Returning Officer/Assistant**  
**Returning Officer/Revising Officer**

I, \_\_\_\_\_ swear (or solemnly affirm) that I will act faithfully and impartially in the performance of my duties as Returning Officer/Assistant Returning Officer/ Revising Officer in the Town/Municipality/Regional Municipality of \_\_\_\_\_.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

\_\_\_\_\_  
Returning Officer/Assistant Returning Officer/  
Revising Officer

**Form 1 amended: N.S. Reg. 182/2004.**

**Form 2**  
**Sections 8, 59**  
**Oath or Affirmation of Deputy Returning Officer/Poll Clerk**

I, \_\_\_\_\_, swear (or solemnly affirm) that I will act faithfully and impartially in the performance of my duties as \_\_\_\_\_, that at the election to be held in the Town/Municipality/Regional Municipality of \_\_\_\_\_ on the \_\_ day of \_\_\_\_\_, \_\_, I will not attempt in any way unlawfully to ascertain the candidate or candidates for whom a voter has voted, and will not in any way aid in the unlawful discovery of the same, and will keep secret all knowledge which may come to me of the persons for whom any voter has voted.

I have not been convicted of a corrupt practice, as defined in the *Municipal Elections Act*, or of bribery.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

\_\_\_\_\_  
Deputy Returning Officer/Poll Clerk

**Form 2 amended: N.S. Reg. 182/2004.**

**Form 3**  
**Sections 17, 44, 45**  
**Certificate in Respect to Charges that are Liens/Taxes**

I certify that as of the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
*(nomination day)*  
\_\_\_\_\_ has fully paid all (i) the charges that are liens on  
*(name of candidate)*  
property that are due, (ii) all the municipal taxes that are due, and (iii) all instalments or  
interim payments that are due as of nomination day have been paid to the Town/Municipality/  
Regional Municipality of \_\_\_\_\_ from him/her.

\_\_\_\_\_  
Clerk, Treasurer, Collector or other official  
having knowledge of the facts

**Form 3 replaced: N.S. Reg. 304/2008.**

**Form 4**  
**Section 22**  
**Oath or Affirmation of Registrar of Voters**

I, \_\_\_\_\_ swear (or solemnly affirm) that I will act faithfully  
and impartially in the performance of my duties as registrar of voters in the Town/  
Municipality/Regional Municipality of \_\_\_\_\_, will take all necessary  
precautions and care to ensure the accuracy of the enumeration, and will protect the  
confidentiality of elector information.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

**Form 4 amended: N.S. Reg. 182/2004.**

\_\_\_\_\_  
Registrar of Voters

**Form 5**  
**Section 23**  
**Oath or Affirmation of Enumerator**

I, \_\_\_\_\_ of \_\_\_\_\_,  
(name in full) (residence)  
 appointed enumerator for the Town/Municipality/Regional Municipality of \_\_\_\_\_ swear  
 (or solemnly affirm) that I will act faithfully in my capacity as enumerator without partiality and  
 will take all necessary precautions and care to ensure that the enumerators' index sheet contains  
 correct information concerning all qualified electors in Polling Division Number \_\_\_\_\_ and will  
 not contain the names of any persons who are not qualified. I will protect the confidentiality of  
 elector information that is provided to me.

Sworn (or affirmed) at \_\_\_\_\_  
 in the County of \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_,  
 \_\_\_\_\_, before me

\_\_\_\_\_  
 (see Section 146)

\_\_\_\_\_  
 Enumerator

Form 5 amended: N.S. Reg. 182/2004.

**Form 6**  
**Section 25**  
**Index Sheet (Alphabetical)**

**\*Polling Division (Number, Name or Description)** \_\_\_\_\_

<u>Consecutive Number</u> (Optional)	<u>Name</u> (surname, first name and middle name or initial)	<u>Address</u> Civic Address (number, street, community)	<u>Mailing Address</u> (if different than civic-include postal code) (if necessary)	<u>Date of birth</u> (to be removed from final list of electors)

\* Returning Officer to indicate how poll is to be identified

Form 6 replaced: N.S. Reg. 304/2008.

**Form 6A  
Section 25  
Index Sheet (Geographic)**

**\*Polling Division (Number, Name or Description)** \_\_\_\_\_

<u>Consecutive Number</u> (Optional)	<u>Civic Number</u>	<u>Name</u>  (surname, given name and middle name or initial)	<u>Mailing Address</u>  (if different from civic—include postal code) (if necessary)	<u>Date of birth</u>  (to be removed from final list of electors)
<b>(NAME OF STREET/AVENUE/ROAD/HIGHWAY AND COMMUNITY):</b>				
<b>(NAME OF STREET/AVENUE/ROAD/HIGHWAY AND COMMUNITY):</b>				

\* Returning Officer to indicate how the poll is to be identified  
Form 6A replaced: N.S. Reg. 304/2008.

**Form 7  
Section 27  
Enumerator's Certificate**

I/We, the undersigned enumerator(s), certify that I/we have taken all necessary precautions and care to ensure that the index sheets attached contain correct information concerning the qualified electors in Polling Division Number \_\_\_\_\_ and do not contain the names of any persons who are not so qualified.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Enumerator(s)

**Form 8**  
**Section 36**  
**Oath or Affirmation of Elector**  
**Applying to be Added to the List of Electors at Revision**

I swear (or solemnly affirm) that:

1. On this date I actually reside in Polling Division Number \_\_\_\_\_ of Polling District Number \_\_\_\_\_ of the Town/Municipality/Regional Municipality of \_\_\_\_\_.
2. I have been ordinarily resident in the municipality for a period of three months immediately preceding ordinary polling day in this election and continue to so reside.
3. I am a Canadian citizen and am of the full age of eighteen years, or will be on ordinary polling day.
4. I am not the returning officer, a person serving a sentence in a penal or reform institution, or a person convicted of bribery under the *Municipal Elections Act* in the six years preceding ordinary polling day.

Name of Elector PLEASE PRINT	Civic Address of Elector (and mailing address, if necessary)	Date of Birth	Signature of Elector
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
Revising Officer

**The Voters List may be used in future municipal, provincial or federal elections.**

(Date of birth will be removed from the final list of electors.)

**Form 8 replaced: N.S. Reg. 182/2004.**

**Forms 8A, 8B, and 8C repealed: N.S. Reg. 130/2000.**

**Form 9**  
**Sections 35, 36**  
**Oath or Affirmation of Person Applying for**  
**Amendment of the List of Electors at Revision**

I \_\_\_\_\_ of \_\_\_\_\_, swear (or solemnly  
(name) (address)  
affirm) that I believe that \_\_\_\_\_ of \_\_\_\_\_, registered on  
(name) (address)



**Form 10A**  
**Section 41A**  
**Oath or Affirmation of Elector**  
**Applying for Certificate of Eligibility**

**(This form is to be submitted to the Returning Officer before 5:00 p.m. on Friday, the eighth day before ordinary polling day.)**

I swear (or solemnly affirm) that:

1. On this date I actually reside in Polling Division Number \_\_\_\_\_ of Polling District Number \_\_\_\_\_ of the Town/Municipality/Regional Municipality of \_\_\_\_\_.
2. I have been ordinarily resident in the municipality for a period of three months immediately preceding ordinary polling day in this election and continue to so reside.
3. I am a Canadian citizen and am of the full age of eighteen years, or will be on ordinary polling day.
4. I am not the returning officer, a person serving a sentence in a penal or reform institution, or a person convicted of bribery under the *Municipal Elections Act* in the 6 years preceding ordinary polling day.

Name of Elector (Please Print)	Address of Elector	Signature of Elector	Consents to Name being added to Voters List*

(\* write yes or no)

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(See Section 146)

**The Voters List may be used in future municipal, provincial or federal elections.**

Form 10A added: N.S. Reg. 137/2003; replaced: N.S. Reg. 304/2008.



**Consent and Oath or Affirmation of Candidate**

I solemnly swear (or affirm) that:

1. I (He/She), \_\_\_\_\_, consent(s) to the nomination.  
*(name as it should appear on the ballot paper)*
2. I am (He/She is) a Canadian citizen.
3. I am (He/She is) of the full age of eighteen years.
4. I have (He/She has) been ordinarily resident in the Town/Municipality/Regional Municipality of \_\_\_\_\_, or in an area annexed to the Town/Municipality/Regional Municipality, for a period of six months preceding nomination day.
5. I am (He/She is) not indebted to the Town/Municipality/Regional Municipality of \_\_\_\_\_ for any charges that are liens on property or taxes, or all instalments or interim payments that are due as of nomination day have been paid, and a certificate from the \_\_\_\_\_ to this effect is attached.
6. I have (He/She has) not been convicted of bribery or of committing a corrupt practice under the *Municipal Elections Act* within the five years preceding nomination day.
7. I have (He/She has) read the sections of the *Municipal Elections Act* related to persons disqualified to vote, to be nominated or to serve on a council and none of the reasons for disqualification listed in those sections apply to me (him/her).
8. I (He/She) will accept the office of \_\_\_\_\_ if elected.
9. I appoint (He/She appoints) \_\_\_\_\_ of \_\_\_\_\_ as my (his/her) official agent under the *Municipal Elections Act*.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

\_\_\_\_\_  
Candidate (or Agent if authorized and the authorization is attached)

**Receipt**

Received from the above-named candidate or from his/her agent on his/her behalf a completed nomination paper and the sum of \_\_\_\_\_ in legal tender or a certified cheque or money order made payable to the Town/Municipality/Regional Municipality of \_\_\_\_\_ as a deposit pursuant to the *Municipal Elections Act*.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer

**Form 11A  
Section 44  
Nomination Paper  
(District Member, Regional District School Board, District No. \_\_\_\_\_)**

We, the qualified electors whose names appear on the final list of electors of the Town/  
Municipality/Regional Municipality of \_\_\_\_\_, nominate \_\_\_\_\_  
*(name)*

of \_\_\_\_\_ include  
*(civic address)* *(postal code)*

mailing address if different than civic address \_\_\_\_\_  
*(mailing address (if necessary))*

as a candidate for the office of member of the regional school board for the election to be held  
on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature
<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature
<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature
<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature

(Note: these electors must be qualified to vote at the election of the school board candidate.)

**Note: Nomination forms are open for inspection by the public once signed by the Returning Officer.**

.....

**Consent and Oath or  
Affirmation of Candidate**

I solemnly swear (or affirm) that:

1. I (He/She), \_\_\_\_\_, consent(s) to the nomination.  
*(name as it should appear on the ballot paper)*
2. I am (He/She is) a Canadian citizen.
3. I am (He/She is) of the full age of eighteen years.
4. I have (He/She has) been ordinarily resident in the school region for a period of six months preceding nomination day, and continue(s) to so reside.
5. I have (He/She has) not been convicted of any corrupt practice or bribery under the *Municipal Elections Act* within the ten years preceding nomination day.
6. I have (He/She has) not been convicted of an offence referred to in Section 46 of the *Education Act*.
7. I have (He/She has) read the sections of the *Municipal Elections Act* and the *Education Act* related to persons disqualified to vote, to be nominated or to serve on a school board and none of the reasons for disqualification listed in those sections apply to me (him/her).
8. I (He/She) will accept the office of district member of the Regional School Board if elected.
9. I appoint (He/She appoints) \_\_\_\_\_ of \_\_\_\_\_ as my (his/her) official agent under the *Municipal Elections Act*.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

\_\_\_\_\_  
Candidate (or Agent if authorized  
and the authorization is attached)

**Receipt**

Received from the above-named candidate or from his/her agent on his/her behalf a completed nomination paper and the sum of \_\_\_\_\_ in legal tender or a certified cheque or money order made payable to the Town/Municipality/Regional Municipality of \_\_\_\_\_ as a deposit pursuant to the *Municipal Elections Act*.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer



Under the *Education Act*, an “entitled person” is defined to mean a person who is a Canadian citizen AND

- (a) whose first language learned and still understood is French; OR
- (b) who received his or her primary school instruction in Canada in a French-first-language program;  
OR
- (c) who is the parent of a child who has received or is receiving primary or secondary school instruction in Canada in a French-first-language program (note that the definition of “parent” in respect to “entitled persons” does not include a guardian or person acting *in loco parentis* to a child).

I state that I am an “entitled person” within the meaning of this definition.

_____	_____
Name (Please Print)	Signature
_____	_____
Name (Please Print)	Signature
_____	_____
Name (Please Print)	Signature
_____	_____
Name (Please Print)	Signature
_____	_____
Name (Please Print)	Signature

.....

**Statement of Candidate**

Under the *Education Act*, only an “entitled person” may be a member of the *Conseil scolaire acadien provincial*.

Under the *Education Act*, an “entitled person” is defined to mean a person who is a Canadian citizen AND

- (a) whose first language learned and still understood is French; OR
- (b) who received his or her primary school instruction in Canada in a French-first-language program; OR
- (c) who is the parent of a child who has received or is receiving primary or secondary school instruction in Canada in a French-first-language program (note that the definition of parent does not include a guardian or person acting *in loco parentis* to a child).

I state that I am an “entitled person” within the meaning of this definition.

\_\_\_\_\_  
Candidate

(Note: this Statement must be signed by the candidate; it cannot be signed by the official agent.)

.....

## Consent and Oath or Affirmation of Candidate

I swear (or solemnly affirm) that:

1. I (He/She), \_\_\_\_\_, consent(s) to the nomination.  
*(name as it should appear on the ballot paper)*
2. I am (He/She is) a Canadian citizen.
3. I am (He/She is) of the full age of eighteen years.
4. I have (He/She has) been ordinarily resident in the province of Nova Scotia for a period of six months preceding nomination day, and continue(s) to so reside.
5. I have (He/She has) not been convicted of any corrupt practice or bribery under the *Municipal Elections Act* within the ten years preceding nomination day.
6. I have (He/She has) not been convicted of an offence referred to in Section 46 of the *Education Act*.
7. I have (He/She has) read the sections of the *Municipal Elections Act* and the *Education Act* related to persons disqualified to vote, to be nominated or to serve on a school board and none of the reasons for disqualification listed in those sections apply to me (him/her).
8. I (He/She) will accept the office of member of the *Conseil scolaire acadien provincial* if elected.
9. I (He/She) appoint(s) \_\_\_\_\_, of \_\_\_\_\_, as my  
*(name)* *(address)*  
(his/her) official agent under the *Municipal Elections Act*.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

\_\_\_\_\_  
Candidate (or Agent if authorized and the authorization is attached)

### Receipt

Received from the above-named candidate or from his/her agent on his/her behalf a completed nomination paper and the sum of \_\_\_\_\_ in legal tender or a certified cheque or money order made payable to the Town/Municipality/Regional Municipality of \_\_\_\_\_ as a deposit pursuant to the *Municipal Elections Act*.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer

**(A translation of this form is available in French.)**

Form 11B replaced: N.S. Reg. 304/2008.

**Form 11C**  
**Section 44**  
**Section 42A, Education Act**  
**Nomination Paper**  
**(African Nova Scotian Member of Regional School Board)**

We, the qualified electors whose names appear on the final list of electors for the municipality shown opposite each name, nominate: \_\_\_\_\_ of  
*(name)*

\_\_\_\_\_, \_\_\_\_\_ include mailing address if different than civic  
*(civic address)* *(postal code)*  
address \_\_\_\_\_ as a candidate for the office of African Nova Scotian  
*(mailing address (if necessary))*  
member of the Regional School Board for the election to be held on the \_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_.

(Note: Nominators to sign below and also to sign “Statement of Nominators”.)

**Note: Nomination forms are open for inspection by the public once signed by the Returning Officer.**

<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature

<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature

<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature

<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature

<b>Name</b> (please print)	<b>Civic Address</b>	<b>Municipality</b>
_____	_____	_____
		_____ Signature

(Note: these electors must be qualified to vote at the election of the school board member.)

.....

**Statement of Nominators**

Under the *Education Act*, only an “African Nova Scotian elector” may nominate a candidate for election as the African Nova Scotian member of a school board.

Under the *Education Act*, an “African Nova Scotian elector” is defined to mean a person who is qualified to vote in an election of a school board AND

- (a) who is an African Nova Scotian or a black person, OR
- (b) who is the parent of an African Nova Scotian or a black person.

I state that I am an “African Nova Scotian elector” within the meaning of this definition.

_____ Name (Please Print)	_____ Signature
_____ Name (Please Print)	_____ Signature
_____ Name (Please Print)	_____ Signature
_____ Name (Please Print)	_____ Signature
_____ Name (Please Print)	_____ Signature

**Consent and Oath or Affirmation of Candidate**

I swear (or solemnly affirm) that:

1. I (He/She), \_\_\_\_\_, consent(s) to the nomination.  
(name as it should appear on the ballot paper)
2. I am (He/She is) a Canadian citizen.
3. I am (He/She is) of the full age of eighteen years.
4. I have (He/She has) been ordinarily resident in the School Region for a period of six months preceding nomination day, and continue(s) to so reside.
5. Under the *Education Act* an “African Nova Scotian” is defined to mean a person who is an African Nova Scotian or a black person. I state that I am an “African Nova Scotian” within the meaning of this definition.
6. I have (He/She has) not been convicted of any corrupt practice or bribery under the *Municipal Elections Act* within the ten years preceding nomination day.

7. I have (He/She has) not been convicted of an offence referred to in Section 46 of the *Education Act*.
8. I have (He/She has) read the sections of the *Municipal Elections Act* and the *Education Act* related to persons disqualified to vote, to be nominated or to serve on a school board and none of the reasons for disqualification listed in those sections apply to me (him/her).
9. I (He/She) will accept the office of African Nova Scotian member of the Regional School Board.
10. I (He/She) appoint(s) \_\_\_\_\_ of \_\_\_\_\_  
(name) (address)  
as my (his/her) official agent under the *Municipal Elections Act*.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(See Section 146) Candidate (or Agent if authorized  
and the authorization is attached)

**Receipt**

Received from the above-named candidate or from his/her agent on his/her behalf a completed nomination paper and the sum of \_\_\_\_\_ in legal tender or a certified cheque or money order made payable to the Town/Municipality/Regional Municipality of \_\_\_\_\_ as a deposit pursuant to the *Municipal Elections Act*.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer

Form 11C replaced: N.S. Reg. 323/2008.

**Form 12**  
**Section 51**  
**Affidavit re Removal of Advertising Materials**  
**and Return of Lists of Electors**

I, \_\_\_\_\_, solemnly swear (or affirm) that:  
(name of candidate)

1. I was a candidate for the office of \_\_\_\_\_ of the \_\_\_\_\_  
at the election held on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

2. I have removed or caused to be removed all advertising and election materials which were posted or displayed on my behalf.
3. I recognize that failure to remove advertising and election materials from public places is a violation of the *Municipal Elections Act*.
4. I have returned all copies of the list of electors in my possession, and I have either returned, destroyed or deleted any electronic copies provided to me or made by me.

Sworn (or affirmed) at \_\_\_\_\_

in the County of \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)

\_\_\_\_\_  
Candidate (or Official Agent if authorized and  
the authorization is attached)

**(TO BE FILED WITHIN 7 DAYS AFTER ELECTION DAY)**

Form 12 replaced: N.S. Reg. 304/2008.

**Form 12A  
Section 53  
Declaration of Candidate  
Withdrawing from Nomination**

To: Returning Officer,  
Town/Municipality/Regional Municipality of \_\_\_\_\_

I, \_\_\_\_\_, officially nominated as a candidate  
*(candidate's name)*  
at the election now pending, withdraw as a candidate.

Dated at \_\_\_\_\_,  
this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Candidate/Official agent on behalf of candidate

Form 12A added: N.S. Reg. 182/2004.

**Form 13  
Section 66  
Ballot paper**

**FRONT**

Stub	Counterfoil	
		Election for.....
		Vote for not more than..... candidate(s)
		James Allen BROWN <input type="radio"/>
		Frederika COOPER <input type="radio"/>
		Ross George FINDLAY <input type="radio"/>
		Jean Paul SURETTE <input type="radio"/>

**BACK**

Stub

Counterfoil

No. 000000	
.....	line of perforation
No. 000000	
.....	line of perforation
_____ D.R.O. Initials	
_____ of _____	name of municipality
Election for _____	
_____ Polling District (or Ward) No. _____	name of office for councillors or school board members elected by ward or polling district only
_____, _____	date of ordinary polling day

**Form 13A  
Section 66  
Ballot Paper/Plebiscite**

**FRONT**

Stub	Counterfoil	
		<p><b>DO YOU FAVOUR .....?</b></p> <p style="text-align: right;"><b>YES</b>      <input type="radio"/></p> <p style="text-align: right;"><b>NO</b>        <input type="radio"/></p>

**BACK**

Stub

Counterfoil

No. 000000
.....
No. 000000
.....
_____ D.R.O. Initials of _____
Plebiscite respecting _____
_____ _____
_____, _____

line of perforation

line of perforation

name of municipality

description of question

date of ordinary  
polling day

Form 13A added: N.S. Reg. 1/2003; replaced: N.S. Reg. 55/2006.

**Form 14**  
**Section 68**  
**Format of Poll Book**

1. The cover of the poll book shall bear the subject of the election, the polling district number, and the date of ordinary polling day.
2. The first page of the poll book shall contain Form 2.
3. The second page of the poll book shall contain Form 16.
4. Form 24 shall be on the third page, then Forms 25, 26, 26A, 27, 28, and 29 shall follow.
5. Then shall follow twelve pages of Form 30.
6. Then shall follow three pages of Form 31.
7. Then shall follow two pages of Form 31A.
8. Then shall follow two pages of Form 31B.
9. Then shall follow three pages of Form 32.
10. Then shall follow eight pages of Form 33 or 34 for each matter for which a poll was granted.
11. Then shall follow one page of Form 34A for each school board office to be elected.
12. Then shall follow eight pages of Form 35 for each matter for which a poll was granted.
13. Then shall follow two pages of Form 46, and the back cover.

This format may be varied by altering the number of copies of forms required to be included to suit the circumstances of the election. Additional or loose copies of some forms also may be used; these should be added to the poll book at the end of voting.

**Form 14 replaced: N.S. Reg. 304/2008.**

**Form 14A**  
**Section 68**  
**Format of Poll Book/Plebiscite**

1. The cover of the poll book shall bear the subject of the election, the polling district number, and the date of ordinary polling day.
2. The first page of the poll book shall contain Form 2.
3. Form 24 shall be on the second page, then Forms 25, 26, 26A, 27, 28, and 29 shall follow.
4. Then shall follow twelve pages of Form 30A.

5. Then shall follow three pages of Form 31.
6. Then shall follow three pages of Form 32.
7. Then shall follow eight pages of Form 33.
8. Then shall follow eight pages of Form 35A.
9. Then the back cover.

This format may be varied by altering the number of copies of forms required to be included to suit the circumstances of the election. Additional or loose copies of some forms also may be used; these should be added to the poll book at the end of voting.

**Form 14A added: N.S. Reg. 55/2006.**

**Form 15**  
**Sections 69, 71**  
**Appointment of Agent**

I, the undersigned, candidate (or the official agent of \_\_\_\_\_, a candidate) for  
*(candidate's name)*

\_\_\_\_\_, appoint the following as my (his/her) agent with authority to  
*(office)*

represent me (him/her) in the manner provided by the *Municipal Elections Act* at Polling  
Station Number \_\_\_\_\_ for the election being held on \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
*(name of agent)*

\_\_\_\_\_  
*(address of agent)*

Dated at \_\_\_\_\_ Nova Scotia, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of candidate or of official agent

**Form 16**  
**Section 69**  
**Oath or Affirmation of Agent Representing a Candidate**

I \_\_\_\_\_ the undersigned, swear (or solemnly affirm) that, at the election to be held in the Town/Municipality/Regional Municipality of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, I will not attempt, in any way, unlawfully to ascertain the candidate or candidates for whom a voter has voted and will not in any way aid in the unlawful discovery of the same, and that I will keep secret all knowledge which may come to me of the persons for whom any voter has voted.

**Candidate's Name**

**Agent's Signature**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_ this \_\_\_\_\_ day of  
\_\_\_\_\_, \_\_\_\_\_, before me

\_\_\_\_\_  
Deputy Returning Officer

**Form 17  
Section 70  
Appointment of Official Agent**

I, the undersigned, a candidate for the office of \_\_\_\_\_,

**(place a check mark next to the applicable statement)**

\_\_\_\_\_ appoint \_\_\_\_\_ of \_\_\_\_\_ as my official agent with  
(name) (address)  
authority to represent me in the manner provided by the *Municipal Elections Act* at  
the election being held on \_\_\_\_\_, \_\_\_\_\_.

**OR**

\_\_\_\_\_ declare that I will act personally as official agent in the manner provided by the  
*Municipal Elections Act* at the election being held on \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of candidate

**(A translation of this form is available in French.)**

Form 17 replaced: N.S. Reg. 182/2004.

**Form 18**  
**Section 73**  
**Affidavit of Person Applying for a Transfer Certificate**

**(This form to be submitted to the Returning Officer before 5:00 p.m. on Wednesday before ordinary polling day.)**

I, \_\_\_\_\_ swear (or solemnly affirm) that:

1. I am the elector whose name appears as follows in the list of electors for Polling Station Number \_\_\_\_\_ in Polling District Number \_\_\_\_\_ in the Town/Municipality/Regional Municipality of \_\_\_\_\_.

\_\_\_\_\_  
*Number on List*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Address*

2. During the election I will not vote at the polling station where my name appears on the list of electors unless I surrender the transfer certificate issued to me to the deputy returning officer of that polling station.
3. I have not voted at the advance poll.

I request a transfer certificate to be issued to me to permit me to vote at Polling Station Number \_\_\_\_\_ in Polling District Number \_\_\_\_\_ instead of the above polling station, because:

**(place a check mark next to the applicable statement)**

\_\_\_\_\_ I am a candidate, or

\_\_\_\_\_ I am an agent of a candidate who has appointed me to act at Polling Station Number \_\_\_\_\_ where I intend to vote on election day, or

\_\_\_\_\_ I am a deputy returning officer or poll clerk who has been appointed to act at a polling station other than where my name appears on the list of electors, or

\_\_\_\_\_ I am an assistant returning officer whose name appears on the list of electors for a polling station other than where the headquarters of the returning officer are situate, or

\_\_\_\_\_ I am prevented from voting at the above polling station because of physical disability.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
(see Section 146)  
Form 18 replaced: N.S. Reg. 304/2008.

\_\_\_\_\_  
Applicant

**Form 19**  
**Section 73**  
**Transfer Certificate (Polling Station)**

I certify that the voter named below is entitled under Section 73 of the *Municipal Elections Act* to a transfer certificate permitting him/her to transfer his/her vote from Polling Station Number \_\_\_\_\_ to Polling Station Number \_\_\_\_\_ and I grant this certificate so authorizing him/her.

\_\_\_\_\_  
*(Name of Elector)*

\_\_\_\_\_  
*(Address)*

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer or  
Assistant Returning Officer

**Note: Complete in triplicate**

**Form 20**  
**Section 73**  
**Transfer Certificate**  
(Polling District)

I certify that the voter named below is entitled under Section 73 of the *Municipal Elections Act* to a transfer certificate permitting him/her to transfer his/her vote from Polling Station Number \_\_\_\_\_ in Polling District Number \_\_\_\_\_ to Polling Station Number \_\_\_\_\_ in Polling District Number \_\_\_\_\_, and I grant this certificate so authorizing him/her to vote for the election of \_\_\_\_\_.  
*(specify mayor, councillor(s), regional school board member(s), CSAP, plebiscite)*

\_\_\_\_\_  
Name of Elector

\_\_\_\_\_  
Address

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer or Assistant Returning Officer

Note: Complete in Triplicate  
Form 20 replaced: N.S. Reg. 323/2008.

**Form 21**  
**Section 76**  
**Application for a Proxy Vote**

**(This form is to be submitted to the Returning Officer before 5:00 p.m. on Friday, the eighth day before ordinary polling day.)**

**Part 1**  
**(To Be Completed by the Elector)**

I declare that:

1. I am number \_\_\_\_\_ on the list of electors of, or have a certificate of eligibility for, Polling Division Number \_\_\_\_\_ in Polling District Number \_\_\_\_\_ of the Town/Municipality/Regional Municipality of \_\_\_\_\_.

2. I am applying to vote by proxy because

**(place a check mark next to the applicable statement)**

\_\_\_\_\_ I will be absent from the municipality on the advance poll days and on ordinary polling day.

**OR**

\_\_\_\_\_ I cannot attend at the polling station because of illness or physical disability.

3. I appoint as my proxy voter \_\_\_\_\_ who is  
*(give full name)*

**(place a check mark next to the applicable statement)**

\_\_\_\_\_ an elector and whose number on the list of electors or his/her certificate of eligibility for the Town/Municipality/Regional Municipality of \_\_\_\_\_ is \_\_\_\_\_.

**OR**

\_\_\_\_\_ related to me as \_\_\_\_\_, *(give relationship: child/grandchild/brother/sister/parent/grandparent/husband/wife)* and who is an elector on the list of electors of, or has a certificate of eligibility for, the Town/Municipality/Regional Municipality of \_\_\_\_\_.

**OR**

**(For Residents of Homes for the Aged Approved or Nursing Homes Licensed under the *Homes for Special Care Act* Only)**

\_\_\_\_\_ related to me as \_\_\_\_\_, *(give relationship: child/grandchild/brother/sister/parent/grandparent/husband/wife)* and who is eighteen years of age or will be on ordinary polling day.

I declare that the above statements have been read by me or read to me and are true.

I also understand that I cannot vote in person on ordinary polling day unless I cancel the proxy paper before five o'clock on the afternoon of Friday, the eighth day before ordinary polling day.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of the Elector

**Part 2**

**Certificate of Proxy Voter**

**(To Be Completed by the Proxy Voter)**

I, \_\_\_\_\_ certify that:  
*(name of proxy voter)*

1. To the best of my knowledge, information and belief, all the information contained on the above appointment of proxy voter is correct; and

2. **(Place a check mark next to the applicable statement)**

I have not previously been appointed as proxy voter for any other elector during the pending election.

**OR**

I have only previously been appointed as proxy voter for one other elector during the pending election, who is not related to me, and I am related to the elector to whom this appointment relates as \_\_\_\_\_.  
*(give relationship: child/grandchild/brother/sister/parent/grandparent/husband/wife)*

**OR**

I have only previously been appointed as proxy voter during the pending election for:

\_\_\_\_\_  
\_\_\_\_\_  
*(name and full address)*

who is/are related to me as follows:

\_\_\_\_\_.  
*(give relationship: child/grandchild/brother/sister/parent/grandparent/husband/wife)*

3. I am

**(place a check mark next to the applicable statement)**

an elector on the list of electors or with a certificate of eligibility for the same municipality as the elector for whom I have been appointed as proxy voter.

**OR**

**(For Proxy Voters for Residents of Homes for Aged Approved or Nursing Homes Licensed under the *Homes for Special Care Act*)**

\_\_\_\_\_ related to the elector for whom I have been appointed as proxy voter as \_\_\_\_\_, (give relationship: *child/grandchild/ brother/sister/parent/grandparent/husband/wife*) and am of eighteen years of age or will be on ordinary polling day.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Proxy Voter

**PLEASE READ THE FOLLOWING IMPORTANT NOTICES:**

1. A person may act as proxy voter for one unrelated elector and any number of electors who are a child, grandchild, brother, sister, parent, grandparent, husband or wife of the proxy voter.
2. This form must be presented to the Returning Officer by the elector or proposed proxy voter in person before five o'clock on the afternoon of Friday the eighth day before ordinary polling day so that a Proxy Paper in Form 22 may be issued.
3. **APPOINTING A PROXY VOTER MEANS THAT THE ELECTOR CANNOT VOTE OTHER THAN BY PROXY. THIS APPLICATION FORM DOES NOT PERMIT AN ELECTOR TO VOTE ON ELECTION DAY.**

Form 21 replaced: N.S. Reg. 304/2008.

**Form 22**  
**Section 76**  
**Number... Proxy Paper**

**(A Proxy Voter can vote only on Ordinary Polling Day.**  
**A Proxy Voter cannot vote at any Advance Poll.)**

To: The Deputy Returning Officer

Polling Station Number \_\_\_\_\_

Polling District of \_\_\_\_\_

I certify that:

\_\_\_\_\_

*(name of elector)*

of \_\_\_\_\_

*(his/her address)*

being number \_\_\_\_\_ on the list of electors or having certificate of eligibility number \_\_\_\_\_ for the above polling station may vote by proxy by his/her proxy voter,

\_\_\_\_\_

*(name of proxy voter)*

\_\_\_\_\_

*(address of proxy voter)*

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Returning Officer

Form 22 replaced: N.S. Reg. 304/2008.

**Form 23**  
**Section 68**  
**Directions to Electors**

Attention Electors

Mark the ballot paper by placing a cross, an "X", a check mark, or a line made with a pencil or pen in the circular space on the ballot paper at the right of the name of the candidate (or names of the candidates if more than one are to be elected) for whom you intend to vote.

**Election for Councillor**  
**Vote for not more than two candidates**

John James JONES



Robert Simon SMITH



Sheila Elaine TURNER



**Then fold and return to the Deputy Returning Officer.**

**A spoiled ballot may be exchanged for a new one.**

**WARNING: It is an offence to mark the ballot paper so that you may be identified.**

Form 23 replaced: N.S. Reg. 304/2008.

Form 23A repealed: N.S. Reg. 323/2008.

**Form 24**  
**Section 83**

**Elector's Oath or Affirmation of Qualification**

You swear (or solemnly affirm) that

1. You are the person named (or intended to be named) by the name of \_\_\_\_\_ in the list of electors now shown to you (showing the list to elector) and that on this date you do actually reside in Polling Division Number \_\_\_\_\_ of the Town/Municipality/Regional Municipality of \_\_\_\_\_ and that the address of your residence is \_\_\_\_\_.
2. You are the full age of eighteen (18) years or will be on ordinary polling day.
3. You are a Canadian citizen or will be on ordinary polling day.
4. You have been ordinarily resident in the Town/Municipality/Regional Municipality of \_\_\_\_\_ for a period of three months immediately preceding ordinary polling day in this election.
5. You are not the returning officer, a person serving a sentence in a penal or reform institution, or a person convicted of bribery under the *Municipal Elections Act* in the six years preceding ordinary polling day.

6. You have not voted before in this election at any polling place and will not do so or attempt to do so.
7. You have not received anything nor has anything been promised to you directly or indirectly in order to induce you to vote or refrain from voting in this election.

Form 24A repealed: N.S. Reg. 130/2000.

**Form 25**  
**Section 86**  
**Oath or Affirmation of Elector Requiring Assistance**

You swear (or solemnly affirm) that you require assistance in voting because you are blind, unable to read or have a physical disability which prevents you from voting without assistance.

**Form 26**  
**Section 86**  
**Oath or Affirmation of Friend of Elector Requiring Assistance (Unrelated)**  
*(For use by a person who is not a candidate and who is not related to the elector)*

You swear (or solemnly affirm) that you have not previously acted as a friend for any other elector in the election who is not a child, grandchild, brother, sister, parent, grandparent, husband or wife, that you will carry out the wishes of the elector on whose behalf you act and that you will keep secret the name of the candidate or candidates for whom you mark the ballot paper.

**Note: A candidate may not act as friend of an elector who is not a child, grandchild, brother, sister, parent, grandparent, husband or wife of the candidate. A person who is not a candidate may act as friend for one unrelated elector and any number of electors who are a child, grandchild, brother, sister, parent, grandparent, husband or wife of the friend.**

Form 26 replaced: N.S. Reg. 137/2003.

**Form 26A**  
**Section 86**  
**Oath or Affirmation of Friend of Elector**  
**Requiring Assistance (Candidate/Relative)**  
*(For use by a person, including a candidate, who is related to the elector)*

You swear (or solemnly affirm) that the elector on whose behalf you act is a child, grandchild, brother, sister, parent, grandparent, husband or wife, that you will carry out the wishes of the elector and that you will keep secret the name of the candidate or candidates for whom you mark the ballot paper.

**Note: A candidate may not act as friend of an elector who is not a child, grandchild, brother, sister, parent, grandparent, husband or wife of the candidate. A person who is not a candidate may act as friend for one unrelated elector and any number of electors who are a child, grandchild, brother, sister, parent, grandparent, husband or wife of the friend.**

Form 26A added: N.S. Reg. 137/2003.

**Form 27  
Section 87**

**Oath or Affirmation of Interpreter**

You swear (or solemnly affirm) that you shall well and truly interpret the questions asked of the elector and explanations given him/her, and the answers and questions of the elector, and that you will keep secret any information so obtained.

**Form 28  
Section 92**

**Oath or Affirmation as to Error on List**

You swear (or solemnly affirm) that you believe that you are the person intended to be referred to under the name (name as on official list of electors) whose address is given as (address as on the official list of electors).

**Form 29  
Section 93**

**Oath or Affirmation of a Personated Elector**

You swear (or solemnly affirm) that you are (name as on official list of electors) of (address as on official list of electors) whose name is entered on the list of electors now shown you, and that you have not previously voted at this election.

**Form 30**  
**Section 94**  
**Record of Poll**

Order of Voting	No. on List of Electors/Certificate of Eligibility	Name of Elector (Family Name First)	Address of Elector	Voted for Mayor	Voted for Councillor	Voted for District Member Regional School Board	Voted for CSAP	Voted for African Nova Scotian Member, Regional School Board	Voted for Other	Sworn or Affirmed	Refused to Swear or Affirm	Transfer	Added	By Proxy	Remarks (e.g., form of oath taken)
Use a Check Mark															

Form 30 replaced: N.S. Reg. 323/2008.



**Form 31**  
**Section 98**  
**Oath or Affirmation of Elector Not on List of Electors**

I swear (or solemnly affirm) that:

1. On this date I actually reside in Polling Division Number \_\_\_\_\_ of the Town/ Municipality/ Regional Municipality of \_\_\_\_\_.
2. I have been ordinarily resident in the Town/Municipality/Regional Municipality of \_\_\_\_\_ (or in an area annexed to the Town/Municipality/ Regional Municipality of \_\_\_\_\_) for a period of three months immediately preceding ordinary polling day in this election.
3. I have not voted before in this election at any other polling place and will not do so or attempt to do so.
4. I am a Canadian citizen and of the full age of eighteen years, or will be on ordinary polling day.
5. I am not the returning officer, a person serving a sentence in a penal or reform institution, or a person convicted of bribery under the *Municipal Elections Act* in the six years preceding ordinary polling day.

Name of Elector (Please Print)	Address of Elector	Elector's Date of Birth	Signature of Elector	Consents to name being added to Voters List*
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(\* write yes or no)

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me

\_\_\_\_\_  
Deputy Returning Officer

**The Voters List may be used in future municipal, provincial or federal elections.**  
(Date of Birth will be removed from final list of electors.)

Form 31 replaced: N.S. Reg. 304/2008.

**Form 31A**

**Section 98**

**Oath or Affirmation of Elector Not on List of Electors  
for Use When Elector Can Vote Only for Regional School Board**

I swear (or solemnly affirm) that:

1. On this date I actually reside in Polling Division Number \_\_\_\_\_ of the Town/  
Municipality/Regional Municipality of \_\_\_\_\_.
2. I have been ordinarily resident in the school region in which my polling division is located  
for a period of three months immediately preceding ordinary polling day in this election.
3. I have not voted before in this election at any other polling place and will not do so or  
attempt to do so.
4. I am a Canadian citizen and of the full age of eighteen years, or will be on ordinary polling  
day.
5. I am not the returning officer, a person serving a sentence in a penal or reform institution, or  
a person convicted of bribery under the *Municipal Elections Act* in the six years preceding  
ordinary polling day.

Name of Elector (Please Print)	Address of Elector	Elector's Date of Birth	Signature of Elector	Consents to name being added to Voters List*
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(\* write yes or no)

Sworn (or affirmed) at \_\_\_\_\_

in the County of \_\_\_\_\_

this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me

\_\_\_\_\_  
Deputy Returning Officer

**The Voters List may be used in future municipal, provincial or federal elections.**

(Date of Birth will be removed from final list of electors.)

Form 31A replaced: N.S. Reg. 323/2008.

**Form 31B**  
**Section 98**  
**Oath or Affirmation of Elector Not on List of Electors**  
**For Use When Elector Can Vote Only for *Conseil scolaire acadien provincial***

I swear (or solemnly affirm) that:

1. On this date I actually reside in Polling Division Number \_\_\_\_\_ of the Town/Municipality/  
Regional Municipality of \_\_\_\_\_.
2. I have been ordinarily resident in the province of Nova Scotia for a period of three months  
immediately preceding ordinary polling day in this election.
3. I have not voted before in this election at any other polling place and will not do so or  
attempt to do so.
4. I am a Canadian citizen and of the full age of eighteen years, or will be on ordinary polling  
day.
5. I am not the returning officer, a person serving a sentence in a penal or reform institution, or  
a person convicted of bribery under the *Municipal Elections Act* in the six years preceding  
ordinary polling day.

Name of Elector (Please Print)	Address of Elector	Elector's Date of Birth	Signature of Elector	Consents to name being added to Voters List*
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(\* write yes or no)

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me

\_\_\_\_\_  
Deputy Returning Officer

(A translation of this form is available in French.)

**The Voters List may be used in future municipal, provincial or federal elections.**

(Date of Birth will be removed from final list of electors.)

Form 31B replaced: N.S. Reg. 304/2008.

Forms 31C and 31D repealed: N.S. Reg. 130/2000.

**Form 32**  
**Section 99**  
**Affidavit of Proxy Voter**

I swear (or solemnly affirm) that

I am the proxy voter named in the proxy paper issued to the following elector whose name appears on the list of electors or who has a certificate of eligibility for this polling station and precedes my signature:

Name of Elector	Address of Elector	Signature of Proxy Voter

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_, before me

\_\_\_\_\_  
Deputy Returning Officer  
**Form 32 amended: N.S. Reg. 137/2003.**

**Form 33**  
**Sections 106, 111, 119**  
**Statement of Poll (One Candidate or Matter)**

(For use when only one candidate to be elected or one matter to be determined)

Municipality: \_\_\_\_\_  
Polling District: \_\_\_\_\_  
Polling Station No.: \_\_\_\_\_  
Election for: \_\_\_\_\_ Date: \_\_\_\_\_

1. Number of blank ballots received from Returning Officer \_\_\_\_\_
2. Add number of ballots from advance poll (if any) \_\_\_\_\_
3. TOTAL BALLOTS TO BE ACCOUNTED FOR \_\_\_\_\_\*

4. Number of ballots taken from polling station (if any) \_\_\_\_\_
5. Number of unused ballots \_\_\_\_\_
6. Number of cancelled ballots (ones not placed in ballot box) \_\_\_\_\_
7. Number of rejected ballots (rejected during counting) \_\_\_\_\_
8. Number of ballots counted for \_\_\_\_\_
9. Number of ballots counted for \_\_\_\_\_
10. Number of ballots counted for \_\_\_\_\_
11. Number of ballots counted for \_\_\_\_\_
12. Number of ballots counted for \_\_\_\_\_
13. Number of ballots counted for \_\_\_\_\_
14. Number of ballots counted for \_\_\_\_\_
15. Number of ballots counted for \_\_\_\_\_
16. Number of ballots counted for \_\_\_\_\_
17. Number of ballots counted for \_\_\_\_\_
18. Number of ballots missing (if any) \_\_\_\_\_
19. TOTAL BALLOTS ACCOUNTED FOR \_\_\_\_\_\*

\*Note: Lines 3 and 19 must balance

Number of names on the final list of electors used at the polling station plus electors sworn in at the polling station and added to the list (if any) \_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Approved: \_\_\_\_\_

We certify that the above statement is correct

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Deputy Returning Officer

\_\_\_\_\_  
 Poll Clerk

Form 33 replaced: N.S. Reg. 130/2000.

**Form 34**  
**Sections 106, 111, 119**  
**Statement of Poll (More Than One Candidate or Matter)**

(For use where more than one candidate is to be elected for the office or more than one matter is to be determined from the ballot)

Municipality: \_\_\_\_\_

Polling District: \_\_\_\_\_

Polling Station No.: \_\_\_\_\_

Election for: \_\_\_\_\_ Date: \_\_\_\_\_

1. \_\_\_\_\_ Number of blank ballots received from Returning Officer
2. \_\_\_\_\_ Add number of ballots from advance poll (if any)
3. \* \_\_\_\_\_ **TOTAL BALLOTS TO BE ACCOUNTED FOR**
4. \_\_\_\_\_ Number of ballots taken from polling station (if any)
5. \_\_\_\_\_ Number of unused ballots
6. \_\_\_\_\_ Number of cancelled ballots (ones not placed in ballot box)
7. \_\_\_\_\_ Number of rejected ballots (rejected during counting)
8. \_\_\_\_\_ Number of ballot papers counted and accepted
9. \_\_\_\_\_ Number of ballot papers missing (if any)
10. \* \_\_\_\_\_ **TOTAL BALLOTS ACCOUNTED FOR**

**\*Note: Lines 3 and 10 must balance**

**Ballots Cast For**

Name of Candidate	Number of Ballots Counted
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Number of names on the final list of electors used at the polling station, plus electors sworn in at the polling station and added to the list (if any) \_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Approved:

We certify that the above statement is correct

\_\_\_\_\_

\_\_\_\_\_  
Deputy Returning Officer

\_\_\_\_\_

\_\_\_\_\_  
Poll Clerk

Form 34 replaced: N.S. Reg. 304/2008.

**Form 34A**  
**Section 123A**  
**Statement of Poll to be Completed when School Board Ballots to be**  
**Transferred for Counting**

Municipality: \_\_\_\_\_

Polling District: \_\_\_\_\_

Polling Station No.: \_\_\_\_\_

Election for: \_\_\_\_\_ Date: \_\_\_\_\_

- 1. Number of blank ballots received from Returning Officer \_\_\_\_\_
  - 2. Add number of ballots from Advance Poll (if any) \_\_\_\_\_
  - 3. TOTAL BALLOTS TO BE ACCOUNTED FOR \_\_\_\_\_\*
  - 4. Number of ballots taken from the polling station (if any) \_\_\_\_\_
  - 5. Number of ballots missing (if any) \_\_\_\_\_
  - 6. Number of unused ballots \_\_\_\_\_
  - 7. Number of cancelled ballots (ones not placed in the ballot box) \_\_\_\_\_
  - 8. Number of ballots cast at polling station for this office  
(ones placed in the ballot box) \_\_\_\_\_♦
  - 9. TOTAL BALLOTS ACCOUNTED FOR \_\_\_\_\_\*
- \*Note: Lines 3 and 9 must balance
- 10. TOTAL BALLOTS BEING TRANSFERRED \_\_\_\_\_♦
- ♦Note: Lines 8 and 10 must balance

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Approved:

We certify that the above statement is correct

\_\_\_\_\_

\_\_\_\_\_  
Deputy Returning Officer

Form 34A added: N.S. Reg. 130/2000; amended: N.S. Reg. 182/2004.

**Form 35**  
**Section 107**  
**Tally Sheet for the Counting of Votes**

To be used by the Deputy Returning Officer or the poll clerk and the candidates' agents at the counting of the votes cast for the various candidates on polling day. A cross or check mark of any kind will be made consecutively in the small squares under the name of the candidate, in the appropriate column, as each vote is called out by the Deputy Returning Officer.

Column of Votes Cast for  ..... (insert name of candidate)	Column of Votes Cast for  ..... (insert name of candidate)	Column of Votes Cast for  ..... (insert name of candidate)	Column of Votes Cast for  ..... (insert name of candidate)	Column of Votes Cast for  ..... (insert name of candidate)	Column of Votes Cast for  ..... (insert name of candidate)
5					5
10					10
15					15
20					20
25					25
30					30
35					35
40					40
45					45
50					50
55					55
60					60
65					65
70					70
75					75
80					80
85					85
90					90
95					95
100					100
105					105
110					110

Form 35 replaced: N.S. Reg. 304/2008.

**Form 35A**  
**Section 107**  
**Tally Sheet for the Counting of Votes/Plebiscite**

To be used by the Deputy Returning Officer or the poll clerk at the counting of the votes cast for the plebiscite on polling day. A cross or check mark of any kind will be made consecutively in the small squares under the question number, in the appropriate column, as each vote is called out by the Deputy Returning Officer.

	<b>Column of Votes Cast for .....YES.....</b>					<b>Column of Votes Cast for .....NO.....</b>				
5										
10										
15										
20										
25										
30										
35										
40										
45										
50										
55										
60										
65										
70										
75										
80										
85										
90										
95										
100										

Form 35A added: N.S. Reg. 55/2006.

**Form 36**  
**Section 107**  
**Tally Sheet for the Counting of Votes At a Plebiscite**

To be used by the Deputy Returning Officer or the poll clerk and the candidates' agents at the counting of the votes cast for a plebiscite on polling day. A cross or check mark of any kind will be made consecutively in the small squares under the question number, in the appropriate column, as each vote is called out by the Deputy Returning Officer.

Column of .....YES.....		Column of .....NO.....		Column of ..... YES ....		Column of ..... NO .....	
5							5
10							10
15							15
20							20
25							25
30							30
35							35
40							40
45							45
50							50
55							55
60							60
65							65
70							70
75							75
80							80
85							85
90							90
95							95
100							100
105							105
110							110

Form 36 replaced: N.S. Reg. 304/2008.

**Form 37**  
**Section 117**  
**Persons Who Have Voted at the Advance Poll**

Advance Polling Station \_\_\_\_\_ comprising Polling Division Numbers \_\_\_\_\_ to \_\_\_\_\_:

Name of Elector	Polling Division Number	Elector's Number on List or Number of Elector's Certificate of Eligibility

The number of electors who voted in this polling station is \_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Deputy Returning Officer

Form 37 amended: N.S. Reg. 137/2003.



**Form 39**  
**Section 147**  
**Section 50, Education Act**  
**Council Member's/School Board Member's Oath of Allegiance and of Office**

I, \_\_\_\_\_, swear (or solemnly affirm) that I will be faithful and bear true allegiance to Her Majesty Queen Elizabeth the Second, Her heirs and successors according to law; (the name of and reference to the sovereign to be changed as occasion requires.)

And that I am duly qualified as required by law for the office of \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_;

And that I will truly, faithfully and impartially execute the duties of the office to which I have been elected to the best of my knowledge and ability;

And that I have not received and will not receive any payment or reward or promise thereof for the exercise of any partiality or other undue execution of the duties of my office.

Sworn (or affirmed) at \_\_\_\_\_  
in the County of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_, before me

\_\_\_\_\_  
Judge, Justice of the Peace  
(or for council members, also Mayor, Warden or Clerk)  
Form 39 replaced: N.S. Reg. 130/2000.

**Form 40**  
**Sections 49A and 49B**  
**Candidate's Campaign Contributions Disclosure Statement**

Name of Candidate:

Name of Agent:

Municipality/School Region:

Date of Election:

List of Contributors (see note below):

Contributor	Address	Contributions
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Note: Insert full name of contributor and residential or business address. Use street address, not postal address. Contributions must be shown for every contributor whose contributions totalled more than \$50.00 since the most recent election.*

I, \_\_\_\_\_, a candidate in the municipal/school board/CSAP election on \_\_\_\_\_ (date), certify that the foregoing statement of disclosure is a true and complete disclosure of all contributions made to me and to my official agent as required by Sections 49A and 49B of the *Municipal Elections Act*.

\_\_\_\_\_  
Candidate

*(To be filed within 60 days after regular polling day with the clerk of the municipality/secretary of school board.)*

**Form 40 added: N.S. Reg. 37/99; amended: N.S. Reg. 182/2004.**

**Form 41  
Sections 49A and 49B  
Association's Campaign Contributions Disclosure Statement**

Name of Association:

Name of Agent:

Name of Candidate Supported:

Municipality/School Region:

Date of Election:

List of Contributors (see note below):

Contributor	Address	Contributions
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Note: Insert full name of contributor and residential or business address. Use street address, not postal address. Contributions must be shown for every contributor whose contributions totalled more than \$50.00 since the most recent election.*

I, \_\_\_\_\_, the appointed agent of \_\_\_\_\_ (name of association) in the municipal/school board/CSAP election on \_\_\_\_\_ (date) certify that the foregoing statement of disclosure is a true and complete disclosure of all contributions made to me as agent of the said association as required by Sections 49A and 49B of the *Municipal Elections Act*.

\_\_\_\_\_  
Agent of Association

*(To be filed within 60 days after regular polling day with the clerk of the municipality/secretary of school board.)*

**Form 41 added: N.S. Reg. 37/99; amended: N.S. Reg. 182/2004.**

**Forms 42 and 43 repealed: N.S. Reg. 137/2003.**



**Form 45**  
**Statement of Poll**  
**Section 123A**  
**Consolidated Count of School Board Ballots**  
**(More than One Member to be Elected from the School Board Electoral District)**

(For use when the ballots from polls with fewer than 10 votes for a school board office are counted by a counting officer)

School Board \_\_\_\_\_

School Board Electoral District \_\_\_\_\_

Number of Polls to be Counted (# of envelopes to be opened and counted) \_\_\_\_\_

1. Total Number of Ballots to be Counted  
 (from endorsements on each envelope from each polling station) \_\_\_\_\_ \*
2. Number of Rejected Ballot Papers \_\_\_\_\_
3. Number of Ballot Papers Counted and Accepted \_\_\_\_\_
4. Number of Ballot Papers Missing (if any)  
 (#1 minus #3) \_\_\_\_\_
5. Additional Ballot Papers (if any)  
 (#3 minus #1) \_\_\_\_\_
6. Total Ballots to be Accounted for \_\_\_\_\_ \*

Note: Lines 1 and 6 must balance.

7 Names of Candidates	Number of Ballots (Votes)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

8. TOTAL BALLOTS ACCOUNTED FOR \_\_\_\_\_ \*

Note: Lines 6 and 8 must balance.

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Approved \_\_\_\_\_

I certify that the above statement is correct

\_\_\_\_\_

\_\_\_\_\_  
 Counting Officer

Form 45 added: N.S. Reg. 130/2000.

**Form 46  
Section 109  
Record of Objections**

<b>No.</b>	<b>Objections Made By</b>	<b>On Behalf of (Name of Candidate)</b>	<b>Nature of Objection</b>	<b>How Decided</b>

Form 46 added: N.S. Reg. 182/2004.

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