



Oath or Affirmation of Fraud

Declaration

SECTION 1

I, _____ of, _____
(Name) (Civic Address)

do solemnly swear that I have NOT voted in this election and I have no knowledge of anyone having voted on my behalf. I hereby grant authority for the City of St. John’s to investigate this matter on my behalf and to prosecute any and all persons responsible for fraudulently casting a vote in my name as per Section 99 and 100 of the Municipal Elections Act, S.N.L., 2001, c. M-20.2, as amended.

SWORN before me at St. John’s, Newfoundland this _____ day of _____, 2020

Returning Officer’s Signature _____

Voter’s Signature _____

Privacy Notice

SECTION 2

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to affirm an allegation of voter fraud. Questions about the collection and use of the information may be directed to the Elections Coordinator, election@stjohs.ca

Please send completed form to:

Contact Information
P.O. Box 908, 10 New Gower Street
St. John’s, NL A1C 5M2

For further information:
Phone: 709-745-2489
Email: election@stjohs.ca