

ELECTORAL LIST REVISION REQUEST FORM

GENERAL ELECTION OF OCTOBER 30, 2026

This form must be completed under oath, accompanied by the necessary supporting documents to verify the information provided, and submitted no later than **October 15, 2026**, to the Chief Electoral Officer, whose contact information is as follows:

By mail

M^e Simon Filiatrault
Chief Electoral Officer
P.O. Box 349
Wendake, Quebec G0A 4V0

Chief Electoral Officer's Office

Salle Ludger Picard
Complexe sportif Desjardins
100, rue Ennonweh/rue des Femmes
418-767-0280
1-800-230-4311
president@electionswendake.ca

SECTION I – TO BE COMPLETED BY THE APPLICANT

ELECTOR IDENTIFICATION

First Name:	
Last Name:	
Date of Birth:	
Indian Status Certificate Number:	
Phone:	
Email:	
Preferred language:	☐ French ☐ English ☐ Other: _____
House number, street, and apartment:	
City:	
Province:	
Country:	
ZIP code:	

IDENTIFICATION OF THE ELECTOR SUBMITTING A REQUEST ON BEHALF OF ANOTHER ELECTOR	
<i>*If you are submitting this application on behalf of an elector other than yourself (for example, for a deceased or ineligible person), please provide your contact information below. Please also attach to your application a document establishing your authority to submit the application on behalf of the elector named in the "Elector Identification" section.</i>	
First Name:	
Last Name:	
Indian Status Certificate Number:	
Date of Birth:	
Phone:	
Email:	
REASON FOR THE REQUEST	
☐ Elector registration <i>(Request to add to the electoral list a person who is eligible to vote on Election Day and whose name was omitted)</i>	Supporting document(s) provided: ☐ Proof of inclusion on the band list ☐ Indian Status Card ☐ Proof of age (18 years of age or older as of October 30, 2026)
☐ Correction of elector information <i>(Request to correct an error, omission, or inaccuracy regarding the last name, first name, phone number, or address of a person already registered).</i>	Information to be corrected: _____ Corrected and updated information to be entered: _____ Supporting documentation provided: _____
☐ Removal of an elector <i>(Request to remove from the voter list a person who has died or is ineligible to vote under the Code électoral).</i>	Reason for removal: ☐ Death (Date of death: ____ / ____ / ____) ☐ Ineligibility to vote under the <i>Code électoral</i> (legal reason): _____ Supporting document(s) provided: ☐ Death certificate ☐ Other official document: _____

CONSENT REGARDING CONFIDENTIALITY AND THE PROTECTION OF PERSONAL INFORMATION

In order to file a request for a revision of the electoral list with the Chief Electoral Officer, I consent to the Chief Electoral Officer collecting and using the necessary personal information requested on this form and sharing it with the *Commission de révision*, whose role is to examine, investigate, and render a decision on requests for review submitted to the Chief Electoral Officer.

The Chief Electoral Officer may disclose the personal information obtained, in part or in its entirety, to the Council of the Wendat Nation so that the Council may make the necessary changes to the band list or for any compatible purpose.

- ☐ By checking this box, I declare that I have fully understood the content of the foregoing and have read the [*Politique du Conseil de la Nation Wendat relative à la confidentialité et à la protection des renseignements personnels concernant les membres, les utilisateurs du site Web et les candidats*](#), available on the Council of the Wendat Nation's website, and that I have received the necessary support to address any questions or concerns I may have regarding the protection of my personal information.

SIGNATURES

SIGNATURE OF THE APPLICANT

I, the undersigned, _____, the applicant named in Section 1, hereby declare under oath the following:

1. I am an elector of the Wendat Nation.
2. All information, facts, and grounds set forth in this form and in the documents attached in support of my application are true, accurate, and complete, to the best of my knowledge.
3. I submit this application in good faith and for the sole purpose of ensuring the accuracy of the Wendat Nation's electoral list for the election on October 30, 2026.

Signature

Date

SIGNATURE OF THE PERSON AUTHORIZED TO ADMINISTER THE OATH

Solemnly declared before me, _____, acting in my capacity as

First and last name

e.g., Chief Electoral Officer / Commissioner of Oaths

in _____, on the _____ day of _____ 2026.

Signature

Date

SECTION II – TO BE COMPLETED BY THE COMMISSION DE RÉVISION		
Date of revision by the Commission:		
Commission members present:		
MEMBERS' DECISION		
Application approved ☐	Modifications (if any):	
Application approved with modifications ☐		
Application denied ☐		
REASONS FOR THE DECISION		
SIGNATURES		
Council employee responsible for demographics (or their designee):	Signature:	Date:
Member:	Signature:	Date:
Member:	Signature:	Date: