ELECTIONS BC
A non-partisan Office of the Legislature

RECORD OF REQUEST FOR PUBLIC INSPECTION OF DOCUMENTS

998
(15/11)

DECLARATION OF APPLICANT: By signing below, I declare that I have submitted a privacy policy acceptable to the Chief Electoral Officer and I will abide by the privacy policy as submitted

ELECTORAL DISTRICT			
FULL NAME OF APPLICANT			
MAILING ADDRESS			
CITY / TOWN	POSTAL CODE	PHONE NO. ( )	EMAIL
INDIVIDUAL OR ORGANIZATION REPRESENTED (IF ACTING AS AUTHORIZED AGENT)			
SIGNATURE OF PERSON INSPECTING / OBTAINING RECORD		DATE (YYYY / MM / DD)	

DESCRIPTION OF DOCUMENT(S) INSPECTED AND REASON FOR REQUEST

OFFICE USE ONLY

APPLICANT INFORMED OF RESTRICTED USE OF INFORMATION (SIGNATURE OF OFFICIAL PERMITTING INSPECTION OF RECORD)	DATE (YYYY / MM / DD)

- ❑ RECORD INSPECTED
- ❑ COPY OBTAINED
- ❑ REPRODUCTION (OFFICIAL PRINTERS ONLY)
- ❑ REQUEST DECLINED
- ❑ PRIVACY POLICY PROVIDED

LOCATION

- ❑ ELECTIONS BC OFFICE
- ❑ DISTRICT ELECTORAL OFFICE

ORIGINAL — ELECTIONS BC
PLEASE KEEP A COPY FOR YOUR RECORDS

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