

Completion Guide

This form is available in hard copy or soft copy on the Elections Ontario website. Please print clearly or type.

An auditor must be appointed within 30 days of receiving contributions of at least \$10,000 or incurring expenses of at least \$10,000, with respect to an election, leadership contest or a calendar year for which a financial statement is required. The auditor or firm whose partners resident in Ontario must be licensed under the Public Accounting Act, 2004. The CFO cannot be the auditor.

For a registered political party, constituency association, candidate or leadership contestant, this form can be used when appointing a new auditor or for any changes in auditor information. This form is not applicable for appointing an auditor for third parties.

An auditor is appointed by a registered political entity to provide an opinion on whether financial statements fairly present the information contained in the financial records.

Forms may be submitted by, mail, fax, email, or hand delivery.

Please see table for specific sections to be completed for each registered entity:

Political Entity	Sections					
	A	B	C	D	E	F
Political Party	✓		✓	✓	✓	
Constituency Association	✓		✓	✓	✓	
Candidate	✓	✓	✓	✓		✓
Leadership Contestant	✓	✓	✓	✓		✓

A. POLITICAL ENTITY INFORMATION

Select the appropriate box for appointment type and political entity type.

Provide the name of political party or independent member, and electoral district name and number (if applicable).

B. ELECTION OR LEADERSHIP CONTEST INFORMATION

If appointing an auditor for an election or leadership contest, provide the event name and full name of candidate or leadership contestant.

C. AUDITOR INFORMATION

Provide the firm name (if applicable), first and last name of the auditor with a valid license in Ontario. If a firm was appointed, provide the name of the partner with a valid license who is a resident of Ontario. Provide the address and contact information of the auditor.

D. CERTIFICATION OF CHIEF FINANCIAL OFFICER

The CFO of the registered political party, constituency association, candidate or leadership contestant must complete and sign this section.

E. CERTIFICATION OF PRESIDENT (OR EQUIVALENT)

The President (or equivalent) of the registered political party or constituency association must complete and sign this section.

F. CERTIFICATION OF CANDIDATE OR LEADERSHIP CONTESTANT

The registered candidate or leadership contestant, if applicable must complete and sign this section.

The AUD-1 form is open to inspection by any person during normal office hours of Elections Ontario. Any person may make extracts from the documents and is entitled to copies of the documents upon payment for their preparation at such rate as the Chief Electoral Officer may determine. Certain data will also be extracted from the information filed and displayed on the Elections Ontario website.

The Chief Electoral Officer's staff is always available to provide assistance. Please contact us at:

Elections Ontario
Compliance Division
26 Prince Andrew Place
Toronto ON M3C 2H4
Internet address: <http://www.elections.on.ca>

Telephone: (416)325-9401
Toll Free: 1-866-566-9066
Fax: (416)325-9466
Email: electfin@elections.on.ca

Appointment of Auditor and Change Notice Form

Compliance Division - 26 Prince Andrew Place Toronto, Ontario M3C 2H4
Telephone: (416) 325-9401 | Toll Free: 1-866-566-9066 | Fax: (416) 325-9466

Disponible aussi en français.

Important Information

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OFFICE USE ONLY

Section A: Political Entity Information

Appointment type: New Change
Political entity type: Party Association Candidate Leadership Contestant

Political party or

Independent Member: _____

Electoral district: _____ ED # [][][][]

Section B: Election or Leadership Contest Information (if applicable)

Name of event: _____

First name: _____ Last name: _____

Section C: Auditor

Firm name (if applicable): _____

First Name: _____ Last name: _____

Business phone: _____ Alternate phone: _____

Email address: _____ Fax: _____

Address: _____

City: _____ Postal code: _____

Contact Person (if different from above) _____

First Name: _____ Last name: _____

Section D: Certification of Chief Financial Officer (CFO)

I, _____, (Name of Chief Financial Officer) consent to the appointment of the auditor named in Section C.

X_____
Signature of CFO_____
Date**Section E: Certification of Party or Association President (if applicable)**

I, _____, (Name of President or equivalent) consent to the appointment of the auditor named in Section C.

X_____
Signature of President (or Equivalent)_____
Date**Section F: Certification of Candidate or Leadership Contestant (if applicable)**

I, _____, (Name of Candidate/Leadership Contestant) consent to the appointment of the auditor named in Section C.

X_____
Signature of Candidate /
Leadership Contestant_____
Date