

## Authorization for Administrators

By completing and issuing a Certificate of Identity and Residence (form E0824), you are confirming, to the best of your knowledge, that the client named on each certificate you issue is a resident of the electoral district in which your facility is located and providing services.

For the certification of each client's identification and place of residence in accordance with the *Election Act*, a client is an individual who returns to sleep or eat at your facility during the five weeks preceding an election.

We appreciate your assistance in facilitating the voting process for your clients. Please complete the Authorization for Administrators and return it to [outreach@elections.on.ca](mailto:outreach@elections.on.ca) before February 14, 2024. Kindly note that digital signatures are not accepted. Thank you very much for your support in making voting easy for all Ontarians.

**Facility:**

**Address:**

**Electoral District:**

**Email:**

**Telephone:**

**Administrator/Representative:**

**Title:**

**Email:**

**Telephone/Extension:**

**Signature:**

Administrator/Representative:

Title:

Email:

Telephone/Extension:

Signature:

Administrator/Representative:

Title:

Email:

Telephone/Extension:

Signature:

Administrator/Representative:

Title:

Email:

Telephone/Extension:

Signature:

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Telephone/Extension:

Signature: