

Municipal Election Questionnaire

Please answer yes or no, attaching additional comments (if required) on a separate sheet.

1. Do you consider yourself pro-lif	te or pro-choice? (Check one only)
2. Do you acknowledge that human	n life begins at conception (fertilization)? Yes No
* *	ou work to promote respect for the right to life of all human consoring or supporting Respect for Life events?
4. Will you oppose providing mun Yes No	icipal funds to organizations that promote or refer for abortion?
5. Would you be in favour of a mainto public health and school pr Yes No	jor use of abstinence/chastity based guidelines incorporated ograms?
Municipality:	Office:
Candidates name (please print)	Signature
Date:	e-mail: