

THE CANADIAN ISLAMIC CONGRESS

420 Erb St. West, Suite: 424, Waterloo, Ontario N2L 6K6

Tel: 519-746-1CIC (1242) - Fax: 519-746-2929

E-mail: cic@canadianislamiccongress.com

URL: <http://www.canadianislamiccongress.com>



Exit Poll for Eligible Canadian Muslim Voters

1. City: _____

2. Province:

- | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> AB | <input type="checkbox"/> BC | <input type="checkbox"/> MB | <input type="checkbox"/> NB | <input type="checkbox"/> NL |
| <input type="checkbox"/> NS | <input type="checkbox"/> NT | <input type="checkbox"/> NU | <input type="checkbox"/> ON | <input type="checkbox"/> PE |
| <input type="checkbox"/> QC | <input type="checkbox"/> SK | <input type="checkbox"/> YT | | |

3. Postal Code: _____

4. Gender:

- Male Female

5. Age Group

- Under 25 25 - 45 45 - 65 Over 65

6. Born in Canada?

- Yes No

7. Did You Vote?

- Yes No

8. Which Party did you vote for?

- | | | |
|---|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Liberal | <input type="checkbox"/> Conservative | <input type="checkbox"/> NDP |
| <input type="checkbox"/> Bloc Quebecois | <input type="checkbox"/> Green | <input type="checkbox"/> Independent |

9. Your Name / Address / Phone / Email:

(THIS INFORMATION IS BEING USED ONLY FOR THE PURPOSE OF THE DRAW - 10 draws for \$50 each for a dinner for two)

Name: _____

Street address: _____

Phone: _____

Email: _____