

DISCLOSURE REPORT



			Amendment #	
TITLE OF INITIATIVE			INITIATIVE NUMBER	
SPONSOR'S FULL NAME				
MAILING ADDRESS				
CITY / TOWN	POSTAL CODE	PHONE NO.	FAX NO.	
EMAIL				
Sponsor for advertising related to:	☐ Initiative Vote			
This disclosure report includes the following forms:				FORMS CHECKLIST X
Value of Advertising by Category –			Form Sm-E(b)I	
Summary of Contributions by Class –			Form Sm-C(b)I	
Contributions of Money Greater than \$250 –			Form S-A1(b)I	
	Anonymous	Contributions –	Form S-A2(b)I	
Advertising sponsored during the initiative petition or vote period did not have a total value of \$500 or more; no additional forms required.				
I declare that to the best of my knowledge, information and be contained in this report and any attachments is complete an				
SIGNATURE OF SPONSOR / PRINCIPAL OFFICER / PRINCIPAL MEMBER		DATE (YYYY / MM / DD)		
PRINTED NAME OF PERSON SIGNING DECLARATION				
WARNING: Signing a false statement is a serious offence and is subject to significant penalties. Please submit completed report to: electoral.finance@elections.bc.ca				