

4400 - DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS ELECTOR ORGANIZATION



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|---------------------------------|
| GENERAL VOTING DAY (YYYY/MM/DD) |
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| NAME OF ELECTOR ORGANIZATION |
|------------------------------|

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|---|
| LEGAL NAME OF ELECTOR ORGANIZATION (IF DIFFERENT) |
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| BALLOT NAME OF ELECTOR ORGANIZATION (IF DIFFERENT) |
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| JURISDICTION |
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Financial agent:

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|-----------------------------------|-------|-------------|--|
| FINANCIAL AGENT'S FULL NAME | | | EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) |
| FINANCIAL AGENT'S MAILING ADDRESS | | | PHONE NO. |
| CITY/TOWN | PROV. | POSTAL CODE | EMAIL (IF AVAILABLE) |

Authorized principal official:

| | | | |
|---|-------|-------------|----------------------|
| AUTHORIZED PRINCIPAL OFFICIAL'S FULL NAME | | | |
| AUTHORIZED PRINCIPAL OFFICIAL'S MAILING ADDRESS | | | PHONE NO. |
| CITY/TOWN | PROV. | POSTAL CODE | EMAIL (IF AVAILABLE) |

Responsible principal official:

| | | | |
|--|-------|-------------|--|
| RESPONSIBLE PRINCIPAL OFFICIAL'S FULL NAME | | | |
| RESPONSIBLE PRINCIPAL OFFICIAL'S MAILING ADDRESS | | | |
| CITY/TOWN | PROV. | POSTAL CODE | |

Tick if elector organization was also a third party sponsor

DECLARATION:

I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the *Local Elections Campaign Financing Act*.

| | |
|--|------------------------------|
| SIGNATURE OF AUTHORIZED PRINCIPAL OFFICIAL | SIGNATURE OF FINANCIAL AGENT |
| DATE (YYYY/MM/DD) | DATE (YYYY/MM/DD) |

WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.