

# INITIATIVE ADVERTISING SPONSOR 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 Petition     Initiative Vote

This disclosure report includes the following forms:

**FORMS  
CHECKLIST**  
**X**

- |   |                      |                          |
|---|----------------------|--------------------------|
| Value of Advertising by Category –          | <b>Form Sm-E(b)I</b> | <input type="checkbox"/> |
| Summary of Contributions by Class –         | <b>Form Sm-C(b)I</b> | <input type="checkbox"/> |
| Contributions of Money Greater than \$250 – | <b>Form S-A1(b)I</b> | <input type="checkbox"/> |
| Anonymous Contributions –                   | <b>Form S-A2(b)I</b> | <input type="checkbox"/> |

**OR**

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 belief, all the information contained in this report and any attachments is complete and accurate.

SIGNATURE OF SPONSOR / PRINCIPAL OFFICER / PRINCIPAL MEMBER	DATE (YYYY / MM / DD)
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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](mailto:electoral.finance@elections.bc.ca)