

4400 - DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS ELECTOR ORGANIZATION



GENERAL VOTING DAY (YYYY/MM/DD)

NAME OF ELECTOR ORGANIZATION

LEGAL NAME OF ELECTOR ORGANIZATION (IF DIFFERENT)

BALLOT NAME OF ELECTOR ORGANIZATION (IF DIFFERENT)
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JURISDICTION

Financial agent:

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

AUTHORIZED PRINCIPAL OFFICIAL'S FULL NAME

AUTHORIZED PRINCIPAL OFFICIAL'S MAILING ADDRESS	PHONE NO.
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CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)
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Responsible principal official:

RESPONSIBLE PRINCIPAL OFFICIAL'S FULL NAME
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RESPONSIBLE PRINCIPAL OFFICIAL'S MAILING ADDRESS
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CITY/TOWN	PROV.	POSTAL CODE
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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
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DATE (YYYY/MM/DD)	DATE (YYYY/MM/DD)
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WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.