

# INITIATIVE FINANCING REPORT

## PROPONENT OR OPPONENT

This report must be filed within 28 days after the initiative petition period or within 90 days after the initiative vote period.

Amendment # \_\_\_\_\_

FULL NAME OF AUTHORIZED PARTICIPANT		<input type="checkbox"/> PETITION	<input type="checkbox"/> VOTE	<input type="checkbox"/> PROPONENT	<input type="checkbox"/> OPPONENT
TITLE OF INITIATIVE					
FINANCIAL AGENT'S LAST NAME		FIRST NAME		MIDDLE NAME(S)	
FINANCIAL AGENT'S MAILING ADDRESS			CITY / TOWN		
POSTAL CODE	PHONE NO.	EMAIL			

This financing report includes the following forms:

**FORMS CHECKLIST**  
**X**

These forms must be included in all reports.	Statement of Initiative Income and Expenses – <b>Form St-I&amp;E-I</b>	<input type="checkbox"/>
	Summary of Initiative Expenses – <b>Form Sm-E-I</b>	<input type="checkbox"/>
These forms only need to be filed if there is information to report.	Summary of Initiative Contributions by Class – <b>Form Sm-C-I</b>	<input type="checkbox"/>
	Initiative Contributions with a Total Value Greater than \$250 – <b>Form S-A1-I</b>	<input type="checkbox"/>
	Permitted Anonymous Initiative Contributions Accepted at Functions – <b>Form S-A2-I</b>	<input type="checkbox"/>
	Prohibited Initiative Contributions – <b>Form S-Ax-I</b>	<input type="checkbox"/>
	Summary of Initiative Advertising Expenses by Class – <b>Form Sm-A-I</b>	<input type="checkbox"/>
	Summary of Initiative Fundraising Functions – <b>Form Sm-F-I</b>	<input type="checkbox"/>
	Initiative Fundraising Function – <b>Form S-F-I</b>	<input type="checkbox"/>
	Initiative Loans and Guarantees – <b>Form S-L1-I</b>	<input type="checkbox"/>
	Initiative Loans / Debts Forgiven / Written Off – <b>Form S-L2-I</b>	<input type="checkbox"/>

I, the Financial Agent, declare that:

- (a) I am authorized to act on behalf of the above-named proponent or opponent;
- (b) this report and appropriate forms have been prepared in accordance with the *Recall and Initiative Act* and generally accepted accounting principles;
- (c) to the best of my knowledge, information and belief, all the information contained in this statement is complete and accurate; and,
- (d) if I become aware that this report does not completely and accurately disclose the required information, I am aware that a supplementary report must be filed within 14 days.

SIGNATURE OF FINANCIAL AGENT	DATE (YYYY / MM / DD)
------------------------------	-----------------------

**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).