



ADVERTISING SPONSOR DISCLOSURE REPORT

F-AS-R (09/08)

PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

TITLE OF INITIATIVE (IF APPLICABLE) OR NAME OF MEMBER OF LEGISLATIVE ASSEMBLY WHO IS SUBJECT OF RECALL PETITION			RECALL / INITIATIVE NUMBER
BC HST - UNDERSTAND THE FACTS			
SPONSOR'S FULL NAME			
JAMES LAITINEN			
MAILING ADDRESS			
101-1001 West Broadway, Box 261			
CITY / TOWN	POSTAL CODE	PHONE NUMBER	FAX NUMBER
Vancouver	V6H 4E4	(604) 565-4000	(604) 564-0626
EMAIL ADDRESS			
james.laitinen@bcmail.com			
Sponsor for advertising related to: <input checked="" type="checkbox"/> Initiative Petition <input type="checkbox"/> Initiative Vote <input type="checkbox"/> Recall Petition			
This disclosure report includes the following forms:			
Value of Advertising by Category –	Form Sm-E(b)R	<input type="checkbox"/>	FORMS CHECKLIST X <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> CHIEF ELECTORAL OFFICE USE ONLY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Summary of Contributions by Class –	Form Sm-C(b)R	<input type="checkbox"/>	
Contributions of Money over \$250 –	Form S-A1(b)R	<input type="checkbox"/>	
Anonymous Contributions –	Form S-A2(b)R	<input type="checkbox"/>	
OR			
<input checked="" type="checkbox"/> Advertising sponsored during the 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)
			2010/07/15
PRINTED NAME OF PERSON SIGNING DECLARATION			
JAMES LAITINEN			
WARNING: Signing a false statement is a serious offence and is subject to significant penalties.			