



ADVERTISING SPONSOR DISCLOSURE REPORT

F-AS-R (10/05)

PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

TITLE OF INITIATIVE OR NAME OF MEMBER OF LEGISLATIVE ASSEMBLY WHO IS SUBJECT OF RECALL PETITION AN INITIATIVE TO END THE HARMONIZED SALES TAX		INITIATIVE / RECALL NUMBER IP-2010-002	
SPONSOR'S FULL NAME COMOX VALLEY NEW DEMOCRATIC PARTY CONSTITUENCY ASSOCIATION			
MAILING ADDRESS PO BOX 3381			
CITY / TOWN COURTENAY	POSTAL CODE V9N 5N5	PHONE NUMBER 250-334-3434	FAX NUMBER SAME
EMAIL ADDRESS kassandradycke@shaw.ca			

Sponsor for advertising related to: Initiative Petition Initiative Vote Recall Petition

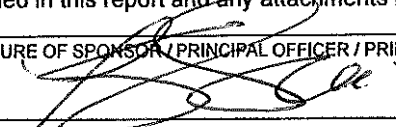
This disclosure report includes the following forms:

	FORMS CHECKLIST
	X
Value of Advertising by Category – Form Sm-E(b)R	<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

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) 2010-07-21
PRINTED NAME OF PERSON SIGNING DECLARATION KASSANDRA DYCKE, PRESIDENT	

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