

ADVERTISING SPONSOR DISCLOSURE REPORT

F-AS-R (10/05)

**ELECTIONS**

A non-partisan Office of the Legislature

FAX → 250 387-3578

PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

TITLE OF INITIATIVE OR NAME OF MEMBER OF LEGISLATIVE ASSEMBLY WHO IS SUBJECT OF RECALL PETITION		INITIATIVE / RECALL NUMBER	
Initiative to End the Harmonized Sales Tax		IP-2010-002	
SPONSOR'S FULL NAME			
Powell River - Sunshine Coast Association of BC NDP			
MAILING ADDRESS			
P.O. Box 65			
IPA-2010-002-007			
CITY/TOWN	POSTAL CODE	PHONE NUMBER	FAX NUMBER
Gibsons BC	V0N1V0	604.886.2543	N/A.
EMAIL ADDRESS			

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

This disclosure report includes the following forms:

FORMS CHECKLIST

Value of Advertising by Category --	Form Sm-E(b)R	<input checked="" 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)
<i>C. Mallory</i>	2010/07/26.
PRINTED NAME OF PERSON SIGNING DECLARATION	
CHARLOTTE MALLORY	

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