## **4213 - DISCLOSURE STATEMENT** LOCAL ELECTIONS THIRD PARTY SPONSOR



PLEASE PRINT IN BLOCK LETTERS			Amendment #
FULL NAME OF SPONSOR		Tor	NEDAL VOTING DAY OGGOVINALIDO
PUBLIC SERVICE ALLIANCE OF	Bc.	GEI	NERAL VOTING DAY (YYYY/MM/DD)
		610N =	2014/10/15
SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES	LEGAL NAME (IF DIFFERENT)		Area and a second
PSAC BC			
MAILING ADDRESS	CITY/TOWN		POSTAL CODE
500- 2538 2016E CL.	VANCOUVE	R	V5R16C9
PHONE NO.	EMAIL (IF AVAILABLE)	-	
664 430 5631	6 BRAGG	Q 4	PSAC. COM
NAME OF JURISDICTION WHERE THIRD PARTY SPONSOR WAS EITHER A CANDIDATE OR ELECTOR ORGANIZATION (IF APPLICABLE)			
ELECTORAL AREA / LOCAL TRUST AREA / TRUSTEE ELECTORAL AREA (IF APPLI	CARLEY	<del>-</del>	
ELECTOMICATEM COOKE MINOTANEM MOSTEE ELECTOMICALINEM AT LE	Choccy	4	Sponsor also acted as a campalgn organizer
	1	<u> </u>	tampaign organizer
For organizations only:			
NAME OF AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION	PHONE NO.		
PATRICK BRAGG	778 383	1+	73
MAILING ADDRESS	CITY/TOWN		POSTAL CODE
200 - 5238 JOYCE ST.	MANCONVE	R	15R 6C9
EMAIL (IF AVAILABLE)			
BRAGGP @ PSAC, COM			
NAME OF RESPONSIBLE PRINCIPAL OFFICIAL			
BOB JACKSON			
MAILING ADDRESS	CITY/TOWN		POSTAL CODE
200-5238 JOYCE ST.	VANCOUVE	<b>1</b> 2	V5R 6C9
EMAIL (IF AVAILABLE)	- 1417000 10	• -	14211 100-1
CHARLE (II AVAILABLE)			
	,		J
All responsible principal officials must be listed. Attach additional sheets if necessary.			
This disclosure report includes the following forms:	FORMS		
, ,	CHECKLIST		
Summary of Total Value of Advertising – Form 4	1214 🔲		
Value of Directed Advertising by Class and Jurisdiction - Form 4	1215		Advertising sponsored during
Advertising Sponsored in Combination - Form 4	1216 🔲 OR		election proceedings period had a value of less than \$500;
Summary of Sponsorship Contributions by Class - Form 4	1217		dditional forms required.
Significant Contributors (\$100 or more) – Form 4	1218		
Prohibited Sponsorship Contributions – Form 4	= 1		
Total and apprendiction of the state of the			
I 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 INDIVIDUAL SPONSOR OR AUTHORIZED PRINCIPAL OFFICIAL FOR	R ORGANIZATION		DATE (YYYY / MM / DD)
2226			2-11/10/10
PRINTED MAKE OF DEDGON SIGNING OF GLADATION		· · · · · · · · · · · · · · · · · · ·	2014/10/10
PRINTED NAME OF PERSON SIGNING DECLARATION			WARNING: Signing a false

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statement is a serious offence and is subject to significant penalties.