4213 - DISCLOSURE STATEMENT LOCAL ELECTIONS THIRD PARTY SPONSOR



PLEASE PRINT IN BLOCK LETTERS

%	ELECTIONS A non-partisan Office of the Leg	FRC.	
	A non-partisan Office of the Legislature		

Amendment#

FULL NAME OF SPONSOR	GENERAL VOTING DAY (YYYY/MM/DD)				
MICHAEL, W. STROM	2014-11-15				
SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES	LEGAL NAME (IF DIFFERENT)				
MIKHAGE STROM					
MAILING ADDRESS	CITY/TOWN	POSTAL CODE			
116 KERLY RY	61B50NS B	C VON 1183.			
PHONE NO.	EMAIL (IF AVAILABLE)				
604-741-7363	(
NAME OF JURISDICTION WHERE THIRD PARTY SPONSOR WAS EITHER A CAND	I DIDATE OR ELECTOR ORGANIZATION (IF	- APPLICABLE)			
		·			
ELECTORAL AREA / LOCAL TRUST AREA / TRUSTEE ELECTORAL AREA (IF APPL	ICABLE)	Sponsor also acted as a			
GIBSONS BC.		campaign organizer			
For organizations only:					
NAME OF AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION	PHONE NO.				
SAME AS ABOUT					
MAILING ADDRESS	CITY/TOWN	POSTAL CODE			
EMAIL (IF AVAILABLE)					
NAME OF RESPONSIBLE PRINCIPAL OFFICIAL					
MAILING ADDRESS .	CITY/TOWN	POSTAL CODE			
		f			
EMAIL (IF AVAILABLE)					
All responsible principal officials must be listed. Attach additional sheets if necessary.					
This displayure report includes the following forms:	FORMS				
This disclosure report includes the following forms:	CHECKLIST				
Summary of Total Value of Advertising - Form	4214				
Value of Diseated Advantages by Class and Just distant Forms	4245				
Value of Directed Advertising by Class and Jurisdiction – Form	 Advertising sponsored during he election proceedings period had a 				
Advertising Sponsored in Combination - Form	494¢	otal value of less than \$500;			
Summary of Sponsorship Contributions by Class – Form 4217 no additional forms required.					
Significant Contributors (\$100 or more) – Form	4218				
Prohibited Sponsorship Contributions – Form	4219				
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 FO	DATE (YYYY / MM / DD)				
AAA	2015/01/05				
DUALTED MANUE OF DEDOON CICHING PEGLADATION					
PRINTED NAME OF PERSON SIGNING DECLARATION	WARNING: Signing a false statement is a serious offence and is				
MICHAEZ. W. STRON subject to significant penalties.					

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SEE AMENDMENT Amendment #_____

FULL NAME OF SPONSOR		GENERAL VOTING DAY (YYYY/MM/DD)			
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SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES	LEGAL NAME (IF DIFFERENT)				
MIKMAGE STROM					
MAILING ADDRESS	CITY/TOWN	POSTAL CODE			
116 KELLY RD	61Brons B	C VON IV3.			
PHONE NO.	EMAIL (IF AVAILABLE)				
604-741-7363					
NAME OF JURISDICTION WHERE THIRD PARTY SPONSOR WAS EITHER A CAN	DIDATE OR ELECTOR ORGANIZATION (IF	FAPPLICABLE)			
ELECTORAL AREA (LOCAL TRUISTAREA LITERATE LECTORAL AREA (ELAPOLICA	104015				
ELECTORAL AREA / LOCAL TRUST AREA / TRUSTEE ELECTORAL AREA (IF APPI	Sponsor also acted as a campaign organizer				
		campaigh organizer			
For organizations only: NAME OF AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION	PHONE NO.				
SAME AS ABOUE	FROME NO.				
MAILING ADDRESS	CITY/TOWN	POSTAL CODE			
		1.00.12.002			
EMAIL (IF AVAILABLE)					
NAME OF RESPONSIBLE PRINCIPAL OFFICIAL					
MAILING ADDRESS	СІТУ/ТОЖИ	POSTAL CODE			
EMAIL (IF AVAILABLE)		•			
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	4214				
Value of Directed Advertising by Class and Jurisdiction – Form	Advertising sponsored during				
Advertising Sponsored in Combination – Form 4216 OR the election proceedings period had total value of less than \$500;					
Summary of Sponsorship Contributions by Class – Form	no additional forms required.				
Significant Contributors (\$100 or more) – Form					
Prohibited Sponsorship Contributions – Form	4219				
I declare that to the best of my knowledge and belief, this disclosur required under the <i>Local Elections Campaign Financing Act</i> .	e statement completely and accur	ately discloses the information			
SIGNATURE OF INDIVIDUAL SPONSOR OR AUTHORIZED PRINCIPAL OFFICIAL FO	DATE (YYYY / MM / DD)				
Alex	2015/01/05				
PRINTED NAME OF PERSON SIGNING DECLARATION		WARNING: Signing a false			
MICHAEL. W. STROM	statement is a serious offence and is subject to significant penalties.				