

4274 - DISCLOSURE STATEMENT**LOCAL NON-ELECTION ASSENT VOTING ADVERTISING SPONSOR****ELECTIONS**

A non-partisan Office of the Legislature

PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

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|---|-------------------------------|--|--|
| FULL NAME OF SPONSOR Comox Valley Coalition to End Homelessness | | GENERAL VOTING DAY (YYYY/MM/DD) 2015/11/28 | |
| SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES | | LEGAL NAME (IF DIFFERENT) | |
| MAILING ADDRESS 202-576 England Ave | CITY/TOWN Courtenay | POSTAL CODE V9N 2N3 | |
| PHONE NO. 250-897-0511 | EMAIL (IF AVAILABLE) | | |
| JURISDICTION | | | |

For organizations only:

| | | | |
|---|---------------------------|----------------------------------|--|
| NAME OF AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION Richard Clarke | | PHONE NO. 250-941-4595 | |
| MAILING ADDRESS 202-137 Port Augusta St | CITY/TOWN Comox | POSTAL CODE V9M 3N8 | |
| EMAIL (IF AVAILABLE) 137clarke@gmail.com | | | |
| NAME OF RESPONSIBLE PRINCIPAL OFFICIAL Helen Boyd | | | |
| MAILING ADDRESS 1659 Beaufort Ave. | CITY/TOWN Comox | POSTAL CODE V9M 2L7 | |
| EMAIL (IF AVAILABLE) | | | |

All responsible principal officials must be listed. Attach additional sheets if necessary.

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|---|--|--------------------------|-----------|---|
| This disclosure report includes the following forms: | | FORMS CHECKLIST | OR | <input checked="" type="checkbox"/> Advertising sponsored during the assent voting proceedings period had a total value of less than \$500; no additional forms required. |
| Total Value of Advertising – Form 4275 | | <input type="checkbox"/> | | |
| Advertising Sponsored in Combination – Form 4276 | | <input type="checkbox"/> | | |
| Summary of Sponsorship Contributions by Class – Form 4277 | | <input type="checkbox"/> | | |
| Significant Contributors (\$100 or more) – Form 4278 | | <input type="checkbox"/> | | |
| Prohibited Sponsorship Contributions – Form 4279 | | <input type="checkbox"/> | | |

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 ORGANIZATION | DATE (YYYY / MM / DD) 2015/12/11 |
| PRINTED NAME OF PERSON SIGNING DECLARATION Richard D. Clarke | WARNING: Signing a false statement is a serious offence and is subject to significant penalties. |