### **4274 - DISCLOSURE STATEMENT**

# LOCAL NON-ELECTION ASSENT VOTING ADVERTISING SPONSOR A non-partisan Office of the Legislature



#### PLEASE PRINT IN BLOCK LETTERS

Amendment #

	<del>"</del>			
FULL NAME OF SPONSOR LED BUILS		GENERAL VOTING DAY (YYYY/MM/DD)  2016/06/18		
SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES	LEGAL NAME (IF DIFFERENT)			
MAILING ADDRESS 219 Spindrift Rd., PHONE NO. 778-427-6035	EMAIL (IF AVAILABLE)  Leo. bu. 'j's 9	BC POSTAL CODE 1989		
PHONE NO. 778-427-6035	EMAIL (IF AVAILABLE) Leo. buijs 9	yahos, ca		
JURISDICTION AREA Comoa Va	by BE.	REGIONAL DISTRIC		
For organizations only:				
NAME OF AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION	PHONE NO.			
MAILING ADDRESS	CITY/TOWN	POSTAL CODE		
EMAIL (IF AVAILABLE)				
NAME OF RESPONSIBLE PRINCIPAL OFFICIAL				
MAILING ADDRESS	CITY/TOWN	POSTAL CODE		
EMAIL (IF AVAILABLE)	<u>.</u>			
All responsible principal officials must be listed. Attach addition	nal sheets if necessary.			
This disclosure report includes the following forms:	FORMS CHECKLIST			
Total Value of Advertising – Form	4275			
Advertising Sponsored in Combination – Form	4276	Advertising sponsored during the assent voting proceedings period		
Summary of Sponsorship Contributions by Class – Form	4277	had a total value of less than \$500; no additional forms required.		
Significant Contributors (\$100 or more) – <b>Form</b>				
Prohibited Sponsorship Contributions – Form	4279			
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	OR ORGANIZATION	DATE (YYYY / MM / DD)		
Don		2016/06/20		
PRINTED NAME OF PERSON SIGNING DECLARATION		WARNING: Signing a false statement is a serious offence and is		
		subject to significant penalties.		

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## LOCAL NON-ELECTION ASSENT VOTING ADVERTISING SPONSOR



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<b>ELECTIONS</b>	
A non-partisan Office of the Lo	egislature
Amendment #	

FULL NAME OF SPONSOR		GENERAL VOTING DAY (YYYY/MM/DD)	
LED Buijs		2016/06/18	
SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES	LEGAL NAME (IF DIFFERENT)		
MAILING ADDRESS 219 Spindrift Rd.,  PHONE NO. 778-427-6035	Courtenay	BC POSTAL CODE VAN 959	
PHONE NO. 778-427-6035	EMAIL (IF AVAILABLE)  Les buijs e yahos, ca		
JURISDICTION AREA A Comsa Valey BC.			
For organizations only:			
NAME OF AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION	PHONE NO.		
MAILING ADDRESS	CITY/TOWN	POSTAL CODE	
EMAIL (IF AVAILABLE)			
NAME OF RESPONSIBLE PRINCIPAL OFFICIAL			
MAILING ADDRESS	CITY/TOWN	POSTAL CODE	
EMAIL (IF AVAILABLE)	<u></u>		
All responsible principal officials must be listed. Attach additio	nal sheets if necessary.		
This disclosure report includes the following forms:	FORMS CHECKLIST	·	
Total Value of Advertising – Form	4275	4	
riavordonig oppologica in Combination – i Citi 4210		Advertising sponsored during	
Summary of Sponsorship Contributions by Class – Form 4277			
no additional forms required. Significant Contributors (\$100 or more) – Form 4278			
Prøhibited Sponsorship Contributions – Form	4279		
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 OF AUTHORIZED PRINCIPAL OFFICIAL FO	OR ORGANIZATION	DATE (YYYY / MM / DD)	
100m		2016/06/20	
PRINTED NAME OF PERSON SIGNING DECLARATION  LED Buils		WARNING: Signing a false statement is a serious offence and is subject to significant penalties.	