(15/01)

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE





Amendment#

		and the state of t	
CANDIDATE'S FULL NAME	•		GENERAL VOTING DAY (YYYY/MM/DD)
Almee Marie Grice			2017/12/02
BALLOT NAME (IF DIFFERENT FROM ABOVE)		, , , , , , , , , , , , , , , , , , ,	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
Aimee Grice			Councillor
MAILING ADDRESS			PHONE NO.
721 Earle Cres PO Box 1444			250 408-4280
CITY / TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
Oliver		VOH 1TO	aimeeforoliver@gmail.com
JURISDICTION			
Oliver			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELE	CTORAL AREA (IF APPLI	CABLE)	
		O,	
BALLOT NAME OF ENDORSING ELECTOR ORGANIZAT	ION (IF APPLICABLE)		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION	ON (IF APPLICABLE)		
	, , , , , , , , , , , , , , , , , , , ,		
		<u> </u>	
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
GRICE	AIMEE		MARIE
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.
70 BOX 1444		···	850 40°6 43°60
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
00000	No. of the control of	1704/10	puneefordiveragmail con
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	If then	e were previous final	tcial agents, complete form 4236.
		de la companya de la	
X Tick if candidate acted as their own financi	al agent	Tick if candidat	e was registered as a third party sponsor
This disclosure statement includes the following	forms:	_	
Declarations and Campaign Accounts	Earm 4334 🗔	/ Strong	mary of Election Expenses - Form 4229
Decisiations and Campaign Accounts	- FOIRI 4221 W		nary of Electron Expenses - Form 4225
Statement of Income and Expenses	- Form 4222 V	Transfers Giv	en to Elector Organization - Form 4230 🔟
Summary of Campaign Contributions by Class	– Form 4223 🔽	Ot	her Permissible Payments - Form 4231
Significant Contributors (\$100 or more)	- Form 4224	,	Shared Election Expense - Form 4232
- "	<u>_</u>	/	
Prohibited Campaign Contributions	- Form 4225 🔽	Transfers Between (Candidate's Own Accounts - Form 4233
Transfers Received from Elector Organization	- Form 4226	, Disbu	rsement of Surplus Funds - Form 4234
Other Permissible Deposits	- Form 4227 🗸	Free Ad	dvertising from Jurisdiction - Form 4235
		,	-
Fundraising Function Ticket Sales	- Form 4228 💟		Previous Financial Agents — Form 4236 🚺

(14/08)

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Almee Grice	Annya a tuna a terra per a la companya a mana a
Declaration: I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and according to under the Local Elections Campaign Financing Act (LECFA).	surately discloses the information
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD)
PRINTED NAME OF CANDIDATE HIMEE MARIE GRICE	2018/01/26
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
PRINTED NAME OF FINANCIAL AGENT	
Campaign accounts:	
NAME OF SAVINGS CREDIT UNION	
LOGISMAINSTREET OLIVER BC VOHITO	
NAME OF SAVINGS INSTITUTION	<u> An Maria Barata, an an ang pandanana an an ana ang pandanana an a</u>
ADDRESS	
NAME OF SAVINGS INSTITUTION	The second of th
ADDRESS	
NAME OF SAVINGS INSTITUTION	<u>etatik di kata tata taka taka 1000, 1000, 1000, 1000</u>
ADDRESS	

(14/08)

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Airnee Grice		
Total value of campaign contributions from all sources (from box C on form 4223)	2000 948	3.25
Transfers received from elector organization (from box A on form 4226)		
Total other permissible deposits (from box A on form 4227)		
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)		
Total Income (sum of above boxes)	A 10000 A	9-18.23
Election expenses (from box A on form 4229)	894196	
Transfers to elector organization (from box A on form 4230)	700	-
Total other permissible payments (from box A on form 4231)	700	
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)		
Amount of surplus funds disbursed (from box A on form 4234)	46.59	
Total Expenditures (sum of above boxes)	948.25 B	

(14/08)

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE

A non-paytisan Office of the Legislature

NAME OF CANDIDATE Aimee Grice	
Total value of campaign contributions from all sources (from box C on form 4223) 200.0v
Transfers received from elector organization (from box A on form 4228)
Total other permissible deposits (from box 4 on form 4227)
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)
Total Income (sum of above boxes	200.00 A
· /	
SEE AMENDMENT Election expenses (from box A on form 4229	801/00
Transfers to elector organization (from box A on form 4230) 1 111
Total other permissible payments (from box A on form 4231	700
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233	
Amount of surplus funds disbursed (from box A on form 4234)	46.59
Total Expenditures (sum of above boxes)	948.32 B

(14/08)

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Aimee Grice			
	A CONTRACTOR OF THE CONTRACTOR	And the second	
	All Contribut	anoli	
Individuals	8 <i>20</i> 0	94	8.25
Corporations	s Ø		
Unincorporated Business/Commercial Organizations	5 Ø		
Trade Unions	s Ø		
Non-profit Organizations	s O		
Other Identifiable Contributors	s Ø		
Tota	1 s 200	OU A	948.25
Anonymous contributions	s \$	В	
Total contributions (A + B)) 800 .	ලට C	948.25 948.25
Total significant contributions (must equal box A on all forms 4224)	s 200	ಬರಿ	948.25
Total contributions of less than \$100	s Ø		-0
Number of contributors who gave less than \$100	#	,	
Number of anonymous contributors	· # Ø		

(14/08)

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE

ELECTIONS &C
A non-partisan Office of the Legislature

IAME OF CANDIDATE Airnee Grice	
	All Contributions
	Individuals 2000
	Corporations
Unincorporated	I Business/Commercial Organizations
	Trade Unions
	Non-profit Organizations
SEE AMENDMENT	Other Identifiable Contributors
After Galler Leader 0 g. d. A. v. mirror 2	Total \$ 200.00
	Anonymous contributions \$
	Total contributions (A + B) \$ 200.00
Total significant contributions	(must equal box A on all forms 4224) s 200.00
	Total contributions of less than \$100
Number of	contributors who gave less than \$100 #
<i></i>	Number of anonymous contributors #

(14(08)

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Aimee Grice				PAGE
DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR (For class Z, 3, 4, 5 & 5, include full names of two directors)	ADDRESS OF CONTRIBUTOR (For class 2, 2, 4, 5 & 6 only)	CLASS*	VALUE OF CONTRIBUTION
2017/11/14	Manon Wyse		İ	200,60
2017/12/02	Manon Wyse. Aimee Grice		1	748.25
			-	
<u>-</u>				
				111 100001 979771 1001
	·			-
NEEDED, ATTACH AI CLASS OF CONTRIBU 1 — INDIVIDUAL, 2 — CO 4 — TRADE UNION, 5 —		MMERCIAL ORGANIZATION CONTRIE	TOTAL CUTIONS	200.4x

948.25

(14/08)

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE

ELECTIONS A non-pagisan Office of the Legislature

NAME OF CANDIDATE				PAGE
Aimee Grice				OF:
DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR (For class 2, 3, 4, 5 & 5, include full names of two directors)	ADDRESS OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6 only)	CLASS	VALUE OF CONTRIBUTION
2011/11/14	Manon Wyse		Ì	200,00
	•		•	
		/		
•	· · · · · · · · · · · · · · · · · · ·			
	SEE AMENDMENT			
			,	
· · ·				
······································				
	/			
IF NEEDED, ATTACH A	ADDITIONAL FORMS			
*CLASS OF CONTRIB! 1 - INDIVIDUAL, 2 - C	UTO:: COPPORATION, 3 - UNINCORPORATED BUSINESS/CO - RON-PROFIT ORGANIZATION, 6 - OTHER IDENTIFIA	MMERCIAL ORGANIZATION CONTRIB BLE CONTRIBUTOR	TOTAL UTIONS	1200.00

(14/08)

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Aimee Grice		West of Mattheway of the English	14 / 18 / 18 / 18 / 18 / 18 / 18 / 18 /		PAGE OF
NSTRUCTIONS: Complete one s Attach additions	heet for each prohib al forms if necessary	ited campaign con	tribution received.		
RECEIVED FROM INDIVIDUAL ORGANIZATION	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	OATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
ANONYMOUS					
DESCRIPTION OF HOW THE PROHIBITED C					
Complete this field if the prohibit NAME OF INDIVIDUAL	ted campaign contrib	oution was receive	d from an Individua	l.	
Complete these fields if the proh	lbited campaign con	tribution was rece	ived from an organi	zation:	
NAME OF ORGANIZATION			,		CLASS*
MAILING ADDRESS	*			[
NAME OF DIRECTOR	·	NAME OF DIRE	ECTOR		

^{*}CLASSES OF CONTRIBUTORS:
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

(14/08)

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION

ELECTIONS SAC A non-partisan Office of the Legislature LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Aimee Grice			PAGE OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
		MARKET ACCRETIONS	40.8. dil
			:
-			
'Also include legal name if d	illferent than ballot name.	TOTAL	Α .

This form is available for public inspection. ORIGINAL — ELECTIONS BC PLEASE KEEP A COPY FOR YOUR RECORDS This information is collected to administer the *Local Elections Campaign Financing Act.*Questions? Contact: Privacy Officer, Elections BC
1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V9W 9J6

(14/08)

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT

ELECTIONS A non-partisan Office of the Legislature LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

nee Grice				OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AN	OUNT
A CONTRACTOR OF THE CONTRACTOR				
				•
				,
•		,		,
				,
m (in the second secon				

D - Dividends of shares paid by credit union

S – Surplus funds from previous election returned by jurisdiction F – Fundralsing income not reported as a campaign contribution O – Other (describe)

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Questions? Contact: Privacy Officer, Elections BC

1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V8W 936

(14/08)

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



Aimee Grice				PAGE
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISH	NG EVENT		
income reported as campaign	contributions			
	Number of Tickets Sold		Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by org	ganizations			
Purchases by individuals of \$250 wort Purchases by individual that are more thar	h of tickets s of tickets			
				,
	lotal income reporte	ed as campaign contribution	ons	
Remember to report all campa and if applicable, on form 422- Other Income not reported as	iign contributions on for 4 - Significant Contributo	m 4223 - Summary of Ca		ns by Class,

(15/01)

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

		Column A	Calumn D
			Column B
ADVERTISING		Election Expenses	Election Proceedings Period Expenses
	Brochures, pamphlets and flyers	228.65	796
	Internet	182,50	182.50
	Newspaper, magazine, journal	-	
	Radio		
	Signs and billboards	195,95	195.95
	Television		
	Other advertising	10.36	10.36
CAMPAIGN ADMINISTRATION	_		
	Salaries and wages		
, ,	Rent, insurance and utilities		
	Courier and postage	277,20	<u>877</u> 20
	Furniture and equipment		
	Office supplies		
	Professional services		
	Other campaign administration expenses		
	Conventions and meetings		
	Other campaign related functions		
	Research and polling		
	Interest	MANAGEM AND	
XCLUSIONS THAT MUST BE REPORTE	P		- -
	Personal election expenses		
	Interest on loans for election expenses		7.2
	Legal and accounting services		
	Financial agent services		
ther expanses (describe)			
		·	
	· · · · · · · · · · · · · · · · · · ·	7	<u> </u>
:	Total Expenses	A 894,600	B 745,74
	. L.		QQ1 KG
lumn A - Report the value of all election expens	es for goods and services used in the campaign period		0.17 00.

This form is available for public inspection,
ORIGINAL — ELECTIONS BC
PLEASE KEEP A COPY FOR YOUR RECORDS

The information on this form is collected under the authority of the Local Elections Campaign Financing Act and the Avectorn of Information and Probability of Privary Act. It will be used to administer campaign financing rules. If you have questions about the collection, use or declosure of this information, contact the Elections BD Privary Officer at 1-80-461-863, electionsboot@elections.bo.oz or PO Box 8378 3th Prov Govt Victoria, BC VBW 836.

2,2865.

(15/51)

LOCAL ELECTIONS CAMPAIGN FINANCING

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	127 (C. 1 128 (C		
Aimee Grice			
		Column A	Column B
		Election	Election Proceeding
ADVERTISING	shows a smahlata and fluore	Expenses	Period Expenses
Br.	chures, pamphiets and flyers internet		15 79.0 50 180 5
,	interner lewspaper, magazine, journal	1 62.	1222
ין	Radio	/	
		/ 195,9	95 1015.99
	Signs and billboards Television	1-15,	1015
	Other advertising	10.3	10.30
CAMPAIGN ADMINISTRATION	Other governang	10.2	<u> </u>
CAMPAIGN ADMINISTRATION	Salaries and wages	·	
	7		
· .	Rent, insurance and utilities	2-77	20 27 20
· ·	Courier and postage	<u> </u>	20 277.20
OFF ABATAINSAFE	Furniture and equipment	www.	
SEE AMENDMENT	Office supplies Professional services		
Other			
Other camp	aign administration expenses		
Oth	Conventions and meetings	· · · · · · · · · · · · · · · · · · ·	
Qua	er campaign related functions Research and polling	•	
	Interest	-	
EXCLUSIONS THAT MUST BE REPORTED	uncicai	NAME OF TAXABLE PARTY.	
EXCEOSIONS THAT MIDST BE REPORTED	Personal election expenses	-	
Internet o	n loans for election expenses		
	egal and accounting services	- Thomas as a	
	Financial agent services		
Other expenses (describe)	Finantial agent scrytocs		(0.00 average 2 - 0.00 average 2000 p
		j	
	Total Expenses	A 894 W	(B 7457
	Iomi Evhauses	017.	
clumn A - Report the value of all election expenses for goods and			
olumn B - Report the value of all election expenses for goods and	i services used in the election proc	eedings period.	

(14/08)

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE			PAGE
Almee Grice		4.20	ÖF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
·			-
•			
		`	
			·
	·		-
*Also include legal name if o	different than beliet name.	TOTAL	A .

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Questions? Contact: Privacy Officer, Elections BC

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(14/08)

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Airnee Grice				PAGE OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION		AMOUNT
2017/11/30	B	Bank Fees		7.00
				,
		,,		
				,
				ASSESSMENT THE SECOND S
				·

	i e			
*TYPE: B - Bank fees E - Intended election expe	nse that wa	TOT.	AL	A 7,00

F - Paymenta made for fundraising purposes

N = Nomination deposit
O = Other (describe)

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Questions? Contact: Privacy Officer, Elections BC
1-800-861-8683 PO Box 9275 Stn Prov Govt, Victoria BC Vew 9J8

(14/08)

4232 - SHARED ELECTION EXPENSE LOCAL ELECTIONS CANDIDATE



SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

36	ELECTIONS A non-partisan Office of the Leg	
490	A non-partisan Office of the Leg	islature.

NAME OF CANDIDATE Aimee Grice		PAGE OF
DESCRIPTION OF SHARED EXPENSE		
v v communicativity delice	Total value of sha	ared election expense.
	Candidate's portion of shar	red election expense*
	Amount paid directly to	supplier (if applicable)
	Amount of reimbursements giver	n to other candidate(s)
	Amount of reimbursements received	from other candidates
*Note: Demomber to include up	una mantiam af tha abauat aumanaa aa ah alaas	#
Election Expenses.	with whom the expense was shared:	tion expense on form 4229 - Summary o
Election Expenses.		MIDDLE NAME
Election Expenses. Full names of other candidates	with whom the expense was shared:	
Election Expenses. Full names of other candidates	with whom the expense was shared:	
Election Expenses. Full names of other candidates	with whom the expense was shared:	·
Election Expenses. Full names of other candidates	with whom the expense was shared:	
Election Expenses. Full names of other candidates	with whom the expense was shared:	
Election Expenses. Full names of other candidates	with whom the expense was shared:	MIDDLE NAME
Election Expenses. Full names of other candidates	with whom the expense was shared: FIRST NAME	MIDDLE NAME
Election Expenses. Full names of other candidates	with whom the expense was shared: FIRST NAME	MIDDLE NAME
Election Expenses. Full names of other candidates LAST NAME	with whom the expense was shared: FIRST NAME	MIDDLE NAME

(14/08)

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

ME OF CANDIDATE MEE Grice			PAGE
			
nsfers between candidate's	own campaign accounts in same jurisdiction		
,	PURPOSE		AMOUNT
,	-		
,,,,,) 144 ·			
ONLY IN COLUMN TO THE PARTY OF			
	n campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	*	AMOUNT
		-	
		TOTAL	Α
pefore to condidato's own a	campaign accounts in other jurisdictions		
DATE OF TRANSFER	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
(YYYY/MM/DD)	PORPOSE BROLOGE NAME OF OTHER SOCIODO HOLY		AMOUNT
			THE PERSON NAMED IN THE PE
.,			

(14/08)

39.59

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



MAME OF CAMPIDATE		
NAME OF CANDIDATE Aimee Grice		
THITCO OTTOC		
	Balance remaining in campaign account(s) after payment of all expenses	416.59 A
	Total amount of campaign contributions from candidate	718968
Amount reimbursed to	candidate from campaign account for the candidate's contributions to their campaign	35.00 c
	Date of reimbursement to candidate (YYYY/MM/DD)	2018/01/21
	Amount of remaining surplus funds (after any reimbursement under box C)	4.59 D
if the amount in B	ox D is \$500 or more, it must be paid to the jurisdiction in which the candidate ran for election. Provide the date of payment (YYYY/MM/DD).	
If the amount in Bo	x D is less than \$500 provide details of how it was disbursed.	
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
2018/01/31	Bank Fees	7.00
	,	

(14/08)

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Aimee Grice		
SEE AMENI	DMEN ance remaining in campaign account(s) after payment of all expenses	46.59 A
	Total amount of campaign contributions from candidate	74896 B
Amount reimbursed to c	andidate from campaign account for the candidate's contributions to their campaign	35.00 0
	Date of reimbursement to candidate (YYYY/MM/DD)	2018/01/21
	Amount of remaining surplus funds (after any reimbursement under box C)	4.59 D
if the amount in Box	D is \$500 or more, it must be paid to the jurisdiction in which the candidate ran for election. Provide the date of payment (YYYY/MM/DD).	
If the amount in Box I	D is less than \$500 provide details of how it was disbursed.	
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
2018/01/31	Bank Rees	7.00

(14/08)

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE AIMBB Grice				
Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURIBDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
THE RESERVE AND ADDRESS OF THE PERSON OF THE				
MA LAURING AU				
,				
		<u> </u>		

(14/08)

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Almee Grice		amente dans di C <u>alin</u>	<u>a, jokusta oli eli elektronito elektronito elektronito ette parti elektronito ette elektronito ette elektroni</u> E
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME	e ja 1960 talika Marija ekstera j <u>angiga dike-</u>	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD))		
FINANCIAL AGENT'S LAST NAME	FIRST NAME	<u>and the second </u>	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS		-	PHONE NO.
CITY/TOWN	A-1000A-1-1	POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME	geringen wie eine Schaufterfasse in eine die Liebertweiten	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	AND		PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME	The second section of the section of the second section of the section of the second section of the second section of the section of th	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)