

**4300 - DISCLOSURE STATEMENT COVER PAGE**  
**LOCAL ELECTIONS CANDIDATE**



GENERAL VOTING DAY (YYYY/MM/DD) 2018/10/20			
CANDIDATE'S FULL NAME John Samuel Miller		BALLOT NAME (IF DIFFERENT) John Miller	
CANDIDATE'S MAILING ADDRESS PO Box 1245		PHONE NO. 604-885-2188	
CITY/TOWN Sechelt	PROV. BC	POSTAL CODE V0N13A0	EMAIL (IF AVAILABLE)
JURISDICTION Sechelt Indian Government District Advisory Council		OFFICE SOUGHT Advisory Council Member	
ELECTION AREA Election Area 2 - Sechelt			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)			
<input checked="" type="checkbox"/> Tick if candidate is their own financial agent		<input type="checkbox"/> Tick if candidate was also a third party sponsor	
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)		EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)
<b>ZERO CAMPAIGN ACTIVITY</b> Candidates with zero campaign activity may file this form only. If any of the conditions are not met, file other forms applicable to the campaign.			<input checked="" type="checkbox"/> Tick if candidate had zero campaign activity
1. No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc. 2. No expenses, including signs reused from previous elections, campaign account fees, etc. 3. Did not have a campaign account. 4. Did not change financial agents during this election. 5. Did not receive any free election advertising from their jurisdiction (see Form 4312 for description).			
<b>NOTE - ENDORSED CANDIDATES MUST ALSO INCLUDE A COPY OF THEIR CAMPAIGN FINANCING ARRANGEMENT.</b>			
<b>DECLARATION:</b> I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the <i>Local Elections Campaign Financing Act</i> .			
SIGNATURE OF CANDIDATE 		SIGNATURE OF FINANCIAL AGENT	
DATE (YYYY/MM/DD) 2018/10/01		DATE (YYYY/MM/DD)	
<b>WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.</b>			