## 4300 - DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE



					GENERAL VOTING DAY (YYYY/MM/DD) 2018/10/20	
ANDIDATE'S FULL NAME				BALLOT NAME (IF DIFFERENT)		
Duncan Wharrie McMaster			Duncan McMaster			
CANDIDATE'S MAILING ADDRESS			PHONE NO.			
1224 Howard Dr PO Box 261				250-266-0065		
CITY/TOWN	PROV.	POSTAL	CODE	EMAIL (IF AVAILABLE)		
Tofino	ВС	V0R	2Z0	gullcott@cablelan.ne	et	
JURISDICTION	int artives			OFFICE SOUGHT	ter (a transition of the state	
ofino			Councillor			
ELECTION AREA	<del></del>			<u> </u>		
Tofino						
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF	APPLICA	BLE)				
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF I	DIFFEREN	IT)				
✓ Tick if candidate is their own financial agent			Тіс	k if candidate was also a l	third party sponsor	
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)	IF NOT ACTING AS OWN)			EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		
FINANCIAL AGENT'S MAILING ADDRESS	S			PHONE NO.		
CITY/TOWN	PROV.	POSTAL	CODE	EMAIL (IF AVAILABLE)		
ZERO CAMPAIGN ACTIVITY	201	2 - U PROPERTO	residat same			
Candidates with zero campaign activity may file this form of applicable to the campaign.  1. No income or deposits, including funds from the canon previous elections, transfers, etc.  2. No expenses, including signs reused from previous 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 the	didate, co	ntribution campaigr	s, donati	ons, gifts, loans, funds from fees, etc.	Tick if candidate had zero campaign activity	
NOTE - ENDORSED CANDIDATES MUST ALS	41 STORES	4	180		INANCING ARRANGEMENT.	
DECLARATION: I, the undersigned, declare that to the best of my knowled, required under the Local Elections Campaign Financing A		elief, this o	disclosur	e statement completely and	accurately discloses the information	
BIGNATURE OF CANDIDATE OF CANDI	SIGNATU SIGNATU				JRE OF FINANCIAL AGENT	
DATE (YYYY/MM/DD) / 11 / 17					YY/MM/DD)	