

4300 - DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS CANDIDATE



GENERAL VOTING DAY (YYYY/MM/DD) 2018/10/20			
CANDIDATE'S FULL NAME John William Adams		BALLOT NAME (IF DIFFERENT) John Adams	
CANDIDATE'S MAILING ADDRESS 5205 Batty Rd		PHONE NO. 250-723-9107	
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y8T9	EMAIL (IF AVAILABLE) j-sadams@telus.net
JURISDICTION Alberni-Clayoquot Regional District		OFFICE SOUGHT Electoral Area Director	
ELECTION AREA Election Area B			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) none			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT) none			
<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) not applicable		EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)
ZERO CAMPAIGN ACTIVITY			<input checked="" type="checkbox"/> Tick if candidate had zero campaign activity
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.			
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).			
NOTE - ENDORSED CANDIDATES MUST ALSO INCLUDE A COPY OF THEIR CAMPAIGN FINANCING ARRANGEMENT.			
DECLARATION:			
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 <i>John W Adams</i>		SIGNATURE OF FINANCIAL AGENT	
DATE (YYYY/MM/DD) 2018/12/05		DATE (YYYY/MM/DD)	
WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.			