4300 - DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE



			GENERAL VOTING DAY (2018/10/	
CANDIDATE'S FULL NAME			BALLOT NAME (IF DIFFERENT)	
Theodore Norris Bailey			Ted Bailey	
CANDIDATE'S MAILING ADDRESS			PHONE NO.	
PO Box 310 596 Marine Dr			250-726-6277	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	
cluelet	BC	VOR 3A0	tbailey@blackrockresort.com	
JURISDICTION			OFFICE SOUGHT	
Ucluelet			Councillor	
ELECTION AREA				
Ucluelet				
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (I	F APPLICA	ABLE)		
		•		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF	DIFFEREN	NT)		
•				
Tick if candidate is their own financial agent			ck 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)	
	1	1		
Candidates with zero campaign activity may file this form of	only. If any	of the conditions	are not met, file other forms	Makana A. A. Alpanaka
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