## 4300 - DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE



		3-10 Annual Annu	GENERAL VOTING DAY (YYYY/MM/DD) 2019/04/06			
Candidate's full name Clena Holstine		BALLOT NAME (IF DIFFER	ENT)			
CANDIDATE'S MAILING ADDRESS 3309 A Marine Over	رسف	PHONE NO. 604-	414-4591			
Powell River	PROV. POSTAL CODE		time of ginal com			
JURISDICTION Powell River		OFFICE SOUGHT				
ELECTIONAREA CITY of Powell Rive	<u>~</u>					
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF A	APPLICABLE)		and make U.S. produces in the second of an embedding and second second second second second second second second			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DI	IFFERENT)					
Tick if candidate is their own financial agent		Tick if candidate was also a	third party sponsor			
Financial agent's full name (If not acting as own)		EFFECTIVE DATE OF APPO	NYMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.				
GITY/TOWN	PROV. POSTAL CODE	EMAIL (IF AVAILABLE)				
ZERO CAMPAIGN ACTIVITY	ti, eta fire giroke elitariaketa erreren errerea	ene me demokrati po inimatorio de spira de semple altribunga espera de puede de imp	and de transfer and the second and t			
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	ed codes i percebel centralis con conservativa e conservativa e conservativa e conservativa e conservativa e c	Med Ball of Brook (Alfanha) and a little by block of the climater account is designed by	INANCING ARRANGEMENT.			
DECLARATION: I, the undersigned declare that to the beat of my knowledge required under the Local Elections Campaign Financing Act.	ang bejjef this disclos	ure statement completely and	accurately discloses the information			
SIGNATURE OF CANDIDATE	SIGN	TURE OF FINANCIAL AGENT				
DATE ( 1777 / 1MM / DD) 7 / 15	DATE	YYYY/MM/DD)				
WARNING: Signing a false declaration is a serious offence	and is subject to signifi	cant penalties.				

## 4300 - DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE



					GENERAL VOTING DAY (YYY/MM/DD) 2019/64/06		
	CANDIDATE'S FULL NAME Colenn Holstone			SALLOT NAME (IF DIFFEREN	NI)		
	3309 A Marine Avenue			PHONE NO.			
	Prowell River BC V8A 266			glenn hotstine a ginail.com			
XXXXXXX	JURISDICTION POWELL RIVE			OFFICE SOUGHT			
	ELECTIONAREA CILYOR POWELL RIVE						
	BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APP				SEE		
	LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFF	FERENT)		AN	IENDMENT		
	Tick if candidate is their own financial agent		Дэта	if candidate was also a t	nird party sponsor		
	FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)			EFFECTIVE DATE OF APPOIN	TMENT (YYYY/MM/DD)		
が対しては	FINANCIAL AGENT'S MAILING ADDRESS		VIII	PHONE NO.			
	CITY/TOWN PA	ROV. POSTAL	CODE -	EMAIL (IF AVAILABLE)			
Ī	ZERO CAMPAIGN ACTIVITY	groupous elizabeth desire	Common en ou propertie	addien in material est substitute a paga participation and consistent and expenses	et transcription of the first transcription and transcription of the second section of the section of the second section of the section of the second section of the section of the second section of the section of the second section of the section of t		
Candidates with zero campaign activity may file this form only. If any of the conditions are not met, file other forms							
Section of the sectio	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 IN	VCLUDE A	COPYO	THEIR CAMPAIGN F	NANCING 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 Local Elections Campaign Financing Act.							
	SIGNATURE OF CANDIDATE SIGNATURE			E OF FINANCIAL AGENT			
<u> </u>	DATE (YYY/MM/DÓ) DATE (YYY) 2019/04/15		//MM/DD)				
	WARNING: Signing a false declaration is a serious offence an	d is subject to	significant	penalties:			