## 4300 - DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE



					2019/05/11
CANDIDATE'S FULL NAME				BALLOT NAME (IF DIFFEREN	NT)
Adeana Young			Adeana Young PHONE NO.		
CANDIDATE'S MAILING ADDRESS 1852 Balsam Cres PO Box 444					
				250-626-7176	
CITY/TOWN	PROV.	POSTAL C	ODE	EMAIL (IF AVAILABLE)	
Masset	ВС	VOT	1M0	adeanayoung@gma	il.com
URISDICTION				OFFICE SOUGHT	
SD50 - Haida Gwaii School District				Board of Education Trustee	
LECTION AREA					
rustee Election Area 2					
ALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (	(IF APPLICA	ABLE)			- Secondaria - Ellerande
SOAL MANG OF SARONA AND AND AND AND AND AND AND AND AND A					
EGAL NAME OF ENDORSING ELECTOR ORGANIZATION (II	F DIFFEREN	NT)			
	Logic Lengths and com-				MINISTER CONTRACTOR OF THE CON
Tick if candidate is their own financial agent			Ticl	k if candidate was also a t	hird party sponsor
INANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)		ann line	100-10	EFFECTIVE DATE OF APPOI	
, and a second of the second o				ETTECTIVE DATE OF APPOI	NTMENT (TTTT/MM/OD)
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.		
CITY/TOWN	PROV. POSTAL CODE			EMAIL (IF AVAILABLE)	
	1	I THOU		and the first the second	
		11		<u> </u>	
ERO CAMPAIGN ACTIVITY					
andidates with zero campaign activity may file this form pplicable to the campaign.	only. If any	of the con	ditions <b>a</b> ı	re not met, file other forms	
<ul> <li>No income or deposits, including funds from the call</li> </ul>	ndidate co	ntributione	donatio	une aifte lagne funda from	
previous elections, transfers, etc.					Tick if candidate had zero campaign activity
No expenses, including signs reused from previous	elections,	campaign	account	fees, etc.	zero campaign activity
Did not have a campaign account.  Did not change financial agents during this election					
. Did not receive any free election advertising from the	neir jurisdic	tion (see F	orm 431	2 for description).	
IOTE - ENDORSED CANDIDATES MUST AL					INANCING APPANCEMEN
		ODLAG	01 1 0	THEIR CAMPAIGHT	MANCING ARRANGEMEN
DECLARATION:					
the undersigned, declare that to the best of my knowle	dge and be	elief, this di	sclosure	statement completely and a	accurately discloses the information
IGNATURE OF CANDIDATE	AGI.	1.	CIONIATI "	DE DE CINANDIAL ADELE	
STATUTE OF CAMPUILLE			JUTANDIC	RE OF FINANCIAL AGENT	
ATE (YYYY/MM/DD)		<del>-  </del> ,	TATE AVA	YY/MM/DD)	7710
	2019/08/02			Trium (S)	