4300 - DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS CANDIDATE



				GENERAL VOTING DAY (YYYY/MM/DI 2019/06/15	
CANDIDATE'S FULL NAME Elizabeth Alison Garvie CANDIDATE'S MAILING ADDRESS 101-1860 W. 2nd Ave			BALLOT NAME (IF DIFFE	BALLOT NAME (IF DIFFERENT) PHONE NO. 2146629945	
CITY/TOWN Vancouver	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE) agarvie@sbcglobal.net		
JURISDICTION Metro Vancouver			OFFICE SOUGHT Director	1	
ELECTION AREA Electoral Area A					
BALLOT NAME OF ENDORSING ELECTOR ORGA	ANIZATION (IF APPLICA	BLE)			
EGAL NAME OF ENDORSING ELECTOR ORGA	NIZATION (IF DIFFEREN	TT)			
✓ Tick if candidate is their own finance	ial agent		Tick if candidate was also	a third party sponsor	
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)			EFFECTIVE DATE OF AP	EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.	PHONE NO.	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)		
ZERO CAMPAIGN ACTIVITY					
Candidates with zero campaign activity may fil applicable to the campaign. 1. No income or deposits, including funds f previous elections, transfers, etc. 2. No expenses, including signs reused fro B. Did not have a campaign account. 3. Did not change financial agents during the count of	from the candidate, com previous elections, his election.	ntributions, do campaign acc	nations, gifts, loans, funds fro		
NOTE - ENDORSED CANDIDATES IN DECLARATION: , the undersigned, declare that to the best of equired under the Local Elections Campaign	MUST ALSO INCL my knowledge and be	UDE A COP	Y OF THEIR CAMPAIG		
GNATURE OF CANDIDATE SIGNAT			ATURE OF FINANCIAL AGENT	URE OF FINANCIAL AGENT	
ATE (YYYY/MM/DD) 019/09/11			YYY/MM/DD)		