

4300 - DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS CANDIDATE



GENERAL VOTING DAY (YYYY/MM/DD) 2019/07/27			
CANDIDATE'S FULL NAME Hollie Rae Traas		BALLOT NAME (IF DIFFERENT) Hollie Traas	
CANDIDATE'S MAILING ADDRESS PO Box 105		PHONE NO. 250-255-9796	
CITY/TOWN Boston Bar	PROV. BC	POSTAL CODE V0K1C0	EMAIL (IF AVAILABLE) hollie.traas@gmail.com
JURISDICTION SD78 - Fraser Cascade School District		OFFICE SOUGHT Board of Education Trustee	
ELECTION AREA Trustee Election Area 3			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)			
<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)		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 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.			<input checked="" type="checkbox"/> Tick if candidate had zero campaign activity
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>Hollie Traas</i>		SIGNATURE OF FINANCIAL AGENT	
DATE (YYYY/MM/DD) 2019/10/24		DATE (YYYY/MM/DD)	
WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.			