

## 4500 - DISCLOSURE STATEMENT LOCAL ELECTIONS THIRD PARTY SPONSOR



FULL NAME OF SPONSOR George Morgan			GENERAL VOTING DAY (YYYY/MM/DD) 2019/09/14	
SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES			SPONSOR'S LEGAL NAME (IF DIFFERENT)	
MAILING ADDRESS PO Box 514			PHONE NO. 250-284-3301	
CITY/TOWN Port Alice	PROV. BC	POSTAL CODE V0N1 2N0	EMAIL (IF AVAILABLE)	

JURISDICTION WHERE SPONSOR WAS EITHER A CANDIDATE OR ELECTOR ORGANIZATION (IF APPLICABLE)

ELECTION AREA WHERE SPONSOR WAS EITHER A CANDIDATE OR ELECTOR ORGANIZATION (IF APPLICABLE)

**For organizations only:**

AUTHORIZED PRINCIPAL OFFICIAL'S FULL NAME				
AUTHORIZED PRINCIPAL OFFICIAL'S MAILING ADDRESS			PHONE NO.	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	
RESPONSIBLE PRINCIPAL OFFICIAL'S FULL NAME				
RESPONSIBLE PRINCIPAL OFFICIAL'S MAILING ADDRESS				
CITY/TOWN	PROV.	POSTAL CODE		

**All responsible principal officials must be listed. Attach additional forms if necessary.**

**LIMITED ADVERTISING ACTIVITY**

Advertising sponsored during campaign period had a total value of less than \$500. No additional forms required.

**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 INDIVIDUAL SPONSOR OR AUTHORIZED PRINCIPAL OFFICIAL FOR ORGANIZATION <i>T. M. May</i>	DATE (YYYY/MM/DD) SEPT 16 2019
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**WARNING:** Signing a false declaration is a serious offence and is subject to significant penalties.