

DISCLOSURE STATEMENT
LOCAL ELECTIONS THIRD PARTY SPONSOR

Amendment # _____

FULL NAME OF SPONSOR Canadian Association of Physicians for the Environment			GENERAL VOTING DAY (YYYY/MM/DD) 2022/10/15	
SPONSOR'S USUAL NAME, ACRONYM, ABBREVIATIONS AND OTHER NAMES CAPE			SPONSOR'S LEGAL NAME (IF DIFFERENT)	
MAILING ADDRESS PO Box 19008 Walmer			PHONE NUMBER 647-952-4525	
CITY/TOWN Toronto	PROV.	POSTAL CODE M5S 3C9	EMAIL (IF AVAILABLE) raissa@cape.ca	
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 Laurence Barzelai				
AUTHORIZED PRINCIPAL OFFICIAL'S MAILING ADDRESS 288 17th Ave. E			PHONE NUMBER 604-649-7534	
CITY/TOWN Vancouver	PROV.	POSTAL CODE V5V 1A7	EMAIL (IF AVAILABLE)	
RESPONSIBLE PRINCIPAL OFFICIAL'S FULL NAME Melissa Lem				
RESPONSIBLE PRINCIPAL OFFICIAL'S MAILING ADDRESS 2685 Broadway W				
CITY/TOWN Vancouver	PROV.	POSTAL CODE V6K 2G2		

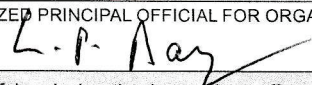
All responsible principal officials must be listed. Attach additional forms if necessary.

LIMITED ADVERTISING ACTIVITY

Advertising sponsored during the pre-campaign and campaign periods was 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 	DATE (YYYY/MM/DD) OCT 24 / 2022
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WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.

Please submit your report to Elections BC: electoral.finance@elections.bc.ca