

## DISCLOSURE STATEMENT COVER PAGE

(22/02)

LOCAL ELECTIONS CANDIDATE

	Amendment #				
				GENERAL VOTING DAY (YYYY/MM/DD) 2022/10/15	
CANDIDATE'S FULL NAME Adam L Koch			BALLOT NAME (IF DIFFE	RENT)	
CANDIDATE'S MAILING ADDRESS		3 Lywylos			
Smithers	BL PROV.	POSTAL CODE	Adam. L. Ko	ch@outlook.com	
JURISDICTION Smithers	Smithers			OFFICE SOUGHT	
Sn: thers				-	
BALLOT NAME OF ENDORSING ELECTOR ORGANIZAT	ION (IF APPL	ICABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION	ON (IF DIFFEI	RENT)		· · · · · · · · · · · · · · · · · · ·	
Tick if candidate is their own financial agen	t	Tie	ck if candidate was also a	a third party sponsor	
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)			EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		
NANCIAL AGENT'S MAILING ADDRESS			PHONE NUMBER		
CITY/TOWN	PROV:	POSTAL CODE	EMAIL (IF AVAILABLE)		
ZERO CAMPAIGN ACTIVITY  Candidates with zero campaign activity may file this forms applicable to the campaign.	rm only. If any	y of the conditions	are not met, file other		
<ol> <li>No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc.</li> <li>No expenses, including signs reused from previous elections, campaign account fees, etc.</li> <li>Did not have a campaign account.</li> <li>Did not change financial agents during this election.</li> </ol>					
NOTE - ENDORSED CANDIDATES MUST A	LSO INCL	UDE A COPY	OF THEIR CAMPAIG	N FINANCING ARRANGEMENT	
<b>DECLARATION:</b> I, the undersigned, declare that to the best of my know required under the <i>Local Elections Campaign Financin</i>		ellef, this disclosur	e statement completely and	accurately discloses the information	
SIGNATURE OF CANDIDATE	SIGNATU			RE OF FINANCIAL AGENT	
			201/01/01/01/01/01/01/01/01/01/01/01/01/0	23	

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

WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.