



THIRD PARTY SPONSOR DISCLOSURE REPORT

ELECTION

F-TPS
(18/01)

ELECTIONS BC
A non-partisan Office of the Legislature

Amendment # _____

GENERAL VOTING DAY (YYYY / MM / DD) 2019 / 01 / 30		ELECTORAL DISTRICT (FOR BY-ELECTION ONLY) Nanaimo	
SPONSOR'S FULL NAME Health Sciences Association of BC			
MAILING ADDRESS 180 E. Columbia St.			
CITY / TOWN New Westminster	POSTAL CODE V3L 1E3	PHONE NO. 604-517-0994	FAX NO.
EMAIL info@hsabc.org			

This disclosure report includes the following forms:

FORMS
CHECKLIST
X

Value of Advertising by Category **Form Sm-E(b)**

Summary of Sponsorship Contributions **Form Sm-C(b)**

Sponsorship Contributions of Money, Goods or Services Greater than \$250 **Form S-A1(b)**

Anonymous Contributions **Form S-A2(b)**

OR

Advertising sponsored during the campaign period did not have a total value of greater than \$500; no additional forms required.

I declare that to the best of my knowledge, information and belief, all the information contained in this report and any attachments is complete and accurate.

SIGNATURE OF SPONSOR / PRINCIPAL OFFICER / PRINCIPAL MEMBER V. Avery	DATE (YYYY / MM / DD) 2019 / 03 / 28
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PRINTED NAME OF PERSON SIGNING DECLARATION VALERIE AVERY
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties.

This form is available for public inspection.
PLEASE KEEP A COPY FOR YOUR RECORDS.

This information is collected under the authority of the *Election Act* and the *Freedom of Information and Protection of Privacy Act*.
The information will be used to administer provisions under the *Election Act*. Questions can be directed to: **Privacy Officer**,
Elections BC 1-800-661-8683, privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6