



ELECTIONS BC
A non-partisan Office of the Legislature

ELECTION FINANCING REPORT

CONSTITUENCY ASSOCIATION

F-CA
(17/12)

Amendment # _____

REGISTERED CONSTITUENCY ASSOCIATION Nanaimo Constituency Association of the BC NDP		GENERAL VOTING DAY (YYYY / MM / DD) 2019/01/30	
REGISTERED POLITICAL PARTY/INDEPENDENT MLA BC NDP			
FINANCIAL AGENT'S LAST NAME Michael	FIRST NAME Olson	MIDDLE NAME(S) W	
FINANCIAL AGENT'S MAILING ADDRESS 1105-838 Agnes Street			
CITY / TOWN New Westminster	POSTAL CODE V3M 6R3	PHONE NO. (250) 713-7717	FAX NO.
EMAIL michaelwarrenolson@gmail.com			

This financing report includes the following forms: FORMS CHECKLIST

This form must be included in all reports.	Transfers Received and Given	Form S-TRF	<input checked="" type="checkbox"/>
Only complete these forms if there is information to report.	Summary of Political Contributions	Form Sm-C	<input type="checkbox"/>
	Political Contributions of Money/Property/Services over \$250	Form S-A1	<input type="checkbox"/>
	Permitted Anonymous Contributions Accepted at Functions	Form S-A2	<input type="checkbox"/>
	Prohibited Contributions	Form S-Ax	<input type="checkbox"/>
	Summary of Fundraising Functions	Form Sm-F	<input type="checkbox"/>
	Fundraising Function	Form S-F	<input type="checkbox"/>
	Loans and Guarantees	Form S-L	<input type="checkbox"/>

I, the Financial Agent, declare that:
 (a) I am authorized to act on behalf of the above-named organization;
 (b) this report and appropriate forms have been prepared in accordance with the *Election Act*, and
 (c) to the best of my knowledge, information and belief, all the information contained in this statement is complete and accurate.

SIGNATURE OF FINANCIAL AGENT 	DATE (YYYY / MM / DD) 2019/04/16
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties.



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TRANSFERS RECEIVED AND GIVEN

S-TRF
(17/12)

NAME OF FILING ENTITY
Nanaimo Constituency Association of the BC NDP

PAGE
OF

DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY TRANSFER WAS RECEIVED FROM OR GIVEN TO	VALUE OF TRANSFER RECEIVED		VALUE OF TRANSFER GIVEN	
	N/A				
TOTAL		A	\$ 0.00	B	\$ 0.00

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