

P.O. Box 2100, Station M, Calgary, AB, Canada, T2P 2M5.

## Campaign Disclosure Statement and Financial Statement

Local Authorities Election Act (Section 147.3, 147.4)

Local Jurisdiction: Calgary Roman Catholic Separate School Division also known as the Calgary Catholic School District or "CCSD".

The personal information on this form is being collected to support the administrative requirements of the local authority's election process with regard to campaign finance requirements legislated under sections 147.3 and 147.4 of the *Local Authorities Election Act*. The collection of this information is also legislated under section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The personal information will be managed in compliance with the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions concerning the collection of this personal information, please contact the Leader, Election Services for The City of Calgary by phone at (403) 476-4110, by email at candidates@calgary.ca or by mail at The City of Calgary, Mail Code #207,

Full Name of Candidate				
Candidate's Mailing Address				
Postal (	Code			
This form, including any contributor information from line 2, is a public document.				
Pre-Campaign Period Report				
(	Pre-Campaign Period Contributions (up to a limit of \$5,000 per year or \$10,000 from candidate's own funds per year) Pre-Campaign Period Expenses			
Campaign Period Revenue				
CAMPAIGN CONTRIBUTIONS				
2 t <b>!</b> 3. [	Fotal amount of contributions of \$50.00 or less  Fotal amount of all contributions of \$50.01 and greater, together with the contributor's name and address (attach listing and amount)  NOTE: For lines 1 and 2 include all money and valued personal property, real property or service contributions.  Deduct total amount of contributions returned  NET CONTRIBUTIONS (line 1 + 2 – 3)			
OTHER SOURCES				
6. <sup>-</sup> 7. <sup>-</sup>	Fotal amount contributed out of candidate's own funds  Fotal net amount received from fund-raising functions  Fransfer of any surplus or deficit from a candidate's previous  election campaign  Fotal amount of other revenue			

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<ol><li>TOTAL OTHER SOURCES (add line 10. Total Campaign Period Revenue (ad</li></ol>	· · · · · · · · · · · · · · · · · · ·	
Campaig	gn Period Expenditures	
11. Total Campaign Period Expenses	Paid Unpaid	TOTAL
Campaign Period Surplus (Deficit) (deduct	line 11 from line 10)	
<b>NOTE:</b> The Candidate must attach an item incurred campaign expenses or received coengagement statement to this form.	•	
ATTESTATION OF CANDIDATE		
This is to certify that to the best of my know the information required under section 147.	<del>-</del>	<del>_</del>
Signature	 Date	

Forward the signed original of this document to the address of the local jurisdiction in which the candidate was nominated for election.

IT IS AN OFFENSE TO FILE A FALSE STATEMENT

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