



**SPRUCE GROVE
VOTES!**

FORM 26
**CAMPAIGN DISCLOSURE STATEMENT AND
FINANCIAL STATEMENT**
Local Authorities Election Act
Sections 147.3, 147.4

MUNICIPALITY: The City of Spruce Grove, Province of Alberta

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

CAMPAIGN CONTRIBUTIONS:

- | | |
|--|----------|
| 1. Pre-Campaign Period Contributions (up to a limit of \$5,000 per year or \$10,000 from candidate's own funds per year) | \$ _____ |
| 2. Pre-Campaign Period Expenses | \$ _____ |

Campaign Period Revenue

CAMPAIGN CONTRIBUTIONS:

- | | |
|---|----------|
| 1. Total amount of contributions of \$50.00 or less | \$ _____ |
| 2. Total 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.

- | | |
|--|----------|
| 3. Deduct total amount of contributions returned | \$ _____ |
| 4. NET CONTRIBUTIONS (line 1 + 2 - 3) | \$ _____ |

OTHER SOURCES:

- | | |
|--|----------|
| 5. Total amount contributed out of candidate's own funds | \$ _____ |
| 6. Total net amount received from fund-raising functions | \$ _____ |



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- 7. Transfer of any surplus or deficit from a candidate's previous election campaign \$ _____
- 8. Total amount of other revenue \$ _____
- 9. TOTAL OTHER SOURCES (add lines 5, 6, 7 and 8) \$ _____
- 10. **Total Campaign Period Revenue** (add lines 4 and 9) \$ _____

Campaign Period Expenditures

- 11. Total Campaign Period Expenses
 - Paid \$ _____
 - Unpaid \$ _____
 - TOTAL \$ _____

The candidate must attach an itemized expense report to this form.

Campaign Period Surplus (Deficit) \$ _____
(deduct line 11 from line 10)

A candidate who has incurred campaign expenses or received contributions of \$50,000 or more must attach a review engagement statement to this form.

ATTESTATION OF CANDIDATE

This is to certify that to the best of my knowledge, this document and all attachments accurately reflect the information required under section 147.4 of the *Local Authorities Election Act*.

Signature of Candidate

Date

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

IT IS AN OFFENCE TO SIGN A FALSE STATEMENT

The personal information on this form is being collected to support the administration requirements of the local authorities election process and is authorized under section 147.4 of the *Local Authorities Election Act* and 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 FOIP Coordinator at 780-962-2611.