## Campaign Disclosure Statement and Financial Statement

Local Authorities Election Act (Sections 147.3, 147.4)

Notice The personal information on this form is being collected to support the administrative 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 instructed under section 35(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions concerning the privacy act in the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions concerning the privacy act in the privacy provisions of the Freedom of Information and Protection of Privacy Act.

Rockyr View County Returning Officer	403-230-1401			
Title of the Responsible Official	Business Phone Number	i.		
LOCAL JURISDICTION	Rocky View County	, PROV	INCE OF	ALBERTA
Full Name of Candidate	Alysha Bates			
Candidate's Mailing Address			1	
			CONTROL DE PERSONAL DE LA CONTROL DE LA CONT	, Alberta
Postal Code				
This form, including any contributor informa	ation from line 2, is a public document.			
	re-Campaign Period Report			
CAMPAIGN CONTRIBUTIONS:				
Pre-Campaign Period Contributions (up to a	limit of \$2.000)		\$	0.00
2. Pre-Campaign Period Expenses (up to a limit of \$2,000)			\$	0.00
	Campaign Period Revenue		-	
CAMPAIGN CONTRIBUTIONS:				
Total amount of contributions of \$50.00 or less			\$	0.00
<ol><li>Total amount of all contributions of \$50.01 and greater, together with the contributor's name and address (attach listing and amount)</li></ol>			\$	
NOTE: For lines 1 and 2, include all money and	i valued personal property, real property of	or service contrib	outions.	
3. Deduct total amount of contributions returned	ed		\$	0.00
<ol> <li>NET CONTRIBUTIONS (line 1 + 2 - 3)</li> <li>OTHER SOURCES:</li> </ol>			\$	
5. Total amount contributed out of candidate's own funds			\$	0.00
6. Total net amount received from fund-raising functions			\$	0.00
7. Transfer of any surplus or deficit from a candidate's previous election campaign			\$	0.00
8. Total amount of other revenue			\$	
9. TOTAL OTHER SOURCES (add line 5, 6, 7 and 8)			\$	
10. Total Campaign Period Revenue (add lines 4 and 9)			\$	
Campaign Period Expenditures				
11. Total Campaign Period Expenses P.	aid \$Unpaid \$	TOTAL	\$	
The Candidate must attach an itemized	expense report to this form.			
Campaign Period Surplus (Deficit)				
(deduct line 11 from line 10)			\$	
ATTESTATION OF CANDIDATE This is to certify that to the best of my knowledge	ge this document and all attachments according	urately reflect the	e informat	ion
required under section 147.4 of the Local Author		- 14		
SABATICS	- Per	215	120	75 5
Signature of Candidate	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 OFFENCE TO SIGN A FALSE STATEMENT

LGS0002 Rev. 2019-03