



ADVERTISING SPONSOR DISCLOSURE REPORT

F-AS-R (10/05)

PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

TITLE OF INITIATIVE OR NAME OF MEMBER OF LEGISLATIVE ASSEMBLY WHO IS SUBJECT OF RECALL PETITION		INITIATIVE / RECALL NUMBER	
SPONSOR'S FULL NAME			
MAILING ADDRESS			
CITY / TOWN	POSTAL CODE	PHONE NUMBER	FAX NUMBER
EMAIL ADDRESS			

Sponsor for advertising related to: Initiative Petition Initiative Vote Recall Petition

This disclosure report includes the following forms:

FORMS
CHECKLIST
X

Value of Advertising by Category –	Form Sm-E(b)R	<input type="checkbox"/>
Summary of Contributions by Class –	Form Sm-C(b)R	<input type="checkbox"/>
Contributions of Money over \$250 –	Form S-A1(b)R	<input type="checkbox"/>
Anonymous Contributions –	Form S-A2(b)R	<input type="checkbox"/>

OR

Advertising sponsored during the petition or vote period did not have a total value of \$500 or more; 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	DATE (YYYY / MM / DD)
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PRINTED NAME OF PERSON SIGNING DECLARATION
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties.