# elections &

## ELECTION FINANCES AND CONTRIBUTIONS DISCLOSURE ACT

#### REGISTRATION OF A NOMINATION CONTESTANT

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INITIAL REGISTRATION

**UPDATE TO REGISTRATION** 

JUL 3 0 2018

NAME OF REGISTERED POLITICAL PARTY  United Conservative Party  Edmonton - Ellerslie  31									
			NOMINATION CONTES						
Prefix	First Name	Last Nam	0	Email Address (do not use o	campaign email address)				
	SANJAY ddress or P.O. Box (do not use campaign offi	PA-	TEL	sanjaykum	28 54/Q Va	hoo.ca			
Street Ad	ddress or P.O. Box (do not use campaign off	ice address)		V /	10/				
32	1-155 Edwar	rds .	Dr SW						
City / Town / Village / Municipality Pn		Prov.	Postal Code	Primary Phone Alternate Phone					
6	dmonton	AB	T6X 1N6	780 708 1219					
	CONTACT INFORMATION								
Nominati	ion Contestant Website (Optional)	Nominatio	on Contestant Email Contact	(Optional) Munic	ipality of Residence (C	)ptional)			
		CHI	EF FINANCIAL OFFICE	R (CFO)					
Prefix	First Name	Last Nam	0	Email Address (do not use campaign email address)					
Street A	ddress or P.O. Box (do not use campaign off	ice address)							
City / To	wn / Village / Municipality	Prov.	Postal Code	Primary Phone	Alternate Phone				
L	OCATION RECORDS ARE MAIN	ITAINED	AND COMMUNICATIO	ONS ADDRESSED (IF O	THER THAN CFO'S /	ADDRESS)			
Prefix	First Name	Last Nam		Email					
Street A	ddress or P.O. Box			•					
City / To	wn / Village / Municipality	Prov. AB	Postal Code	Primary Phone	Alternate Phone				
FINANCIAL INSTITUTION									
Name					-				
	- 10 A								
Street Address or P.O. Box			City / Town / Village / M	funicipality F	Prov. Postal Code				
Ala(-)	(0)				AB				
Name(s)	of Signing Officer(s)								
	REGISTRATION STARTS ON THE	EEARLIES	DATE OF REGISTRAT T DATE OF THE FOLLOWIN	<del>-</del>	.Y AND PROVIDE DA	TE			
	Announcement of intention to seek	endorser	nent as official candidate						
	· ·	· ciidoi ooii		mm / dd / yyy	ry				
	Campaign expense incurred	m	m / dd / yyyy						
Contribution received									
	Π	nm / dd / y	ууу						
CONTINUED ON PAGE 2									

### **ELECTION FINANCES AND CONTRIBUTIONS DISCLOSURE ACT REGISTRATION OF A NOMINATION CONTESTANT**

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OFFICE USE ONLY

NAME OF	E EL ECTORAL DIVISION		IED No.
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Parky Ed	monton - Ell	erslie	31
1			
at in accordance with so registered in the name EFCDA.	ection 9.3 of the <i>Election Financ</i> ed Electoral Division, and that I	ces and Contributions acknowledge the exp  O7/30/2  mm / dd / yyy  confirm that I have	2018 ry
		# F # F	
nowledge the expense	limits prescribed by sections 4°	mm / dd / yy	FCDA.
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* Title	Signature	mm / -	id / yyyy
CEPTANCE BY EL	ECTIONS ALBERTA		
Signature		mm / dd / yy	
CHED ORIGINAL TO I		OFFICE US	уу
	Contestant at in accordance with seregistered in the name EFCDA.  Initial Officer les and responsibilities nowledge the expense  ONTESTANT BY PO pted as a nomination of  Title  CCEPTANCE BY EL  Signature	, declare that the informate at in accordance with section 9.3 of the Election Finance registered in the named Electoral Division, and that I EFCDA.  Confirm that I have accessories and responsibilities of the position as prescribed by nowledge the expense limits prescribed by sections 47 of the Financial Officer  ONTESTANT BY POLITICAL PARTY OR CONSIDER A nomination contestant by the political party at the Signature  Title Signature  CCEPTANCE BY ELECTIONS ALBERTA	, declare that the information provided in this contestant at in accordance with section 9.3 of the Election Finances and Contributions registered in the named Electoral Division, and that I acknowledge the experced in the named Electoral Division, and that I acknowledge the experced in the named Electoral Division, and that I acknowledge the experced in the named Electoral Division, and that I acknowledge the experced in the named Electoral Division, and that I acknowledge the experced in the named in the I have accepted the appointment of the I have accepted the appointment of the Election Finance in the I have accepted the appointment of the Election Finance in the I have accepted the appointment of the Election Finance in the I have accepted the appointment of I have accepted the appointment of the I have accepted the app