

Beverly S. MANNING

, Alberta Postal Code



NOTE:

If a candidate's entire election campaign is funded exclusively out of the candidate's own funds and the candidate's funds are not more than \$10,000, under Section 147.11 of the *Local Authorities Election Act*, the candidate is not required to file this document or open and deposit the funds into a campaign account.

This form, including any contributor information from line 2, is a public document

Campaign Period Revenue

CAMPAIGN CONTRIBUTIONS:

- Total amount of contributions of \$100.00 or less \$ \emptyset
- Total amount of all contributions of \$100.01 and greater, together with the contributor's name and address (attach listing and amount) \$ \emptyset

NOTE: For lines 1 and 2, include all money and valued personal property, real property or service contributions.

- Deduct total amount of contributions returned \$ \emptyset
- NET CONTRIBUTIONS (line 1 + 2 - 3) \$ \emptyset

OTHER SOURCES:

- Total amount contributed out of candidate's own funds \$ \emptyset
- Total net amount received from fund-raising functions \$ \emptyset
- Transfer of any surplus or deficit from a candidate's previous election campaign \$ \emptyset
- TOTAL OTHER SOURCES (add lines 5, 6 and 7) \$ \emptyset
- **Total Campaign Period Revenue** (add lines 4 and 8) \$ \emptyset

Campaign Period Expenditures

- Campaign Period Expenses Paid \$ \emptyset

Campaign Period Surplus (Deficit)
(deduct line 10 from line 9)

+ Unpaid \$ \emptyset

= TOTAL \$ \emptyset

IT IS AN OFFENCE TO SIGN A FALSE STATEMENT

TO BE FILED WITH THE RETURNING OFFICER ON OR BEFORE MARCH 1 IMMEDIATELY FOLLOWING A GENERAL ELECTION YEAR OR 120 DAYS AFTER A BY-ELECTION. The personal information requested on this form is being collected under the authority of s. 118 of the Local Authorities Election Act and will be used only to fulfill the requirements of the Act. Contact the Legislative Services Manager, 2nd Floor, City Hall, 4914 - 48 Avenue, Box 5008, Red Deer, AB T4N 3T4 or 403-342-8132 if you have questions about the use of information collected on this form.

Office										
:										
Mayor			Council lor			Public School Trustee			Catholi c School Trustee	
Full Name of Candidate:						Beverly S. MANNING				

Revenue from:

Cash Donations \$ _____
 Donations in kind \$ _____
 Fundraising Functions \$ _____
 Gifts \$ _____
 Other (please describe) _____ \$ _____
 Interest & self contribution \$ _____
 Other income (e.g. surplus from previous campaign, attach details) \$ _____

REVENUE SUBTOTAL

\$ 0

Less:

Anonymous contributions over \$100 returned (contributor's identity established) \$ _____
 Other contributions returned to contributors \$ _____
 Anonymous contributions paid to Registered Charitable Organization (attached summary) \$ _____

NET REVENUES

\$ 0

Advertising \$ _____
 Food/Beverage/Entertainment \$ _____
 Insurance \$ _____
 Office/Facility/Space Rental \$ _____
 Office Supplies/Equipment \$ _____
 Printing \$ _____
 Salaries \$ _____
 Signage \$ _____
 Transportation \$ _____
 Other (please describe) _____ \$ _____

TOTAL CAMPAIGN EXPENSES

\$ 0

TOTAL CAMPAIGN CONTRIBUTIONS

\$ 0

