(Salgary

ELECTIONS & INFORM

CAMPAIGN DISCLOSURE STATEMENT AND FINANCIAL STATEMENT

18 FEB 28 A9 38

Local Authorities Election Act (Sections 147.11, 147.3 and 147.4)

CC 860 (R2017-08)

Full name of Candidate: WILLE RAE ROBINSON						
Candidate's mailing address:						
CALGARY, Alberta, Pos	tal Code					
NOTE: If a candidate's entire election campaign is funded exclusively out of the the candidate's funds are not more than \$10,000, under Section 147.11 of the Lothe candidate is <u>not</u> required to file this document or open and deposit the funds This form, including any contributor information from Line 2, is a public do	candidate's own funds and ocal Authorities Election Act into a campaign account.					
Campaign Period Revenue						
CAMPAIGN CONTRIBUTIONS: 1. Total amount of contributions of \$100.00 or less	\$ <u>1860</u>					
Total amount of all contributions of \$100.01 and greater, together with the contributor's name and address (attach listing and amount)	\$_1500					
NOTE: For lines 1 and 2, include all money and valued personal property, real property or service contributions.						
Deduct total amount of contributions returned	\$					
4. NET CONTRIBUTIONS (line 1 + 2 - 3)	\$_ <i>3360</i>					
OTHER SOURCES: 5. Total amount contributed out of candidate's own funds	\$					
6. Total net amount received from fund-raising functions	\$					
7. Transfer of any surplus or deficit from a candidate's previous election car	mpaign \$					
8. TOTAL OTHER SOURCES (add lines 5, 6 and 7)	\$					
9. Total Campaign Period Revenue (add lines 4 and 8)	\$ 3360					
Campaign Period Expenditures						
10. Campaign Period Expenses	22					
Paid \$ <u>3358.86</u> Unpaid \$1	rotal \$ <u>3358.86</u>					
Campaign Period Surplus (Deficit) (deduct line 10 from line 9)	s <u>1.14</u>					
ATTESTATION OF CANDIDATE This is to certify that to the best of my knowledge, this document and all attachm information required under section 147.4 of the Local Authorities Election Act.	nents accurately reflect the					
Signature of Candidate 2018-02-6 Date (YYYY-MM-	Z7					
	1 000 011 100 100 100					

Forward the signed original of this document to the Chief Presiding Deputy Returning Officer, City of Calgary, 1103 55 Ave NE, Calgary, AB T2E 6W1 IT IS AN OFFENCE TO SIGN A FALSE STATEMENT.

Amount	Name	Street Address	Prov	City	Postal Code
\$150.00	Frances Wright		AB	Calgary	
\$150.00	Kent Hehr		AB	Calgary	
\$200.00	Haley Brown		AB	Calgary	
\$500.00	Sara Peden		AB	Calgary	
\$200.00	Alison Karim-McSwiney		AB	Calgary	
\$300.00	Kara Levis		AB	Calgary	

\$1,500.00

CITY OF CALGARY

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INFORM TARGES