Campaign Disclosure Statement and Financial Statement

Local Authorities Election Act (Sections 147.3, 147.4)

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the Freedom of Information and Protection of Privacy Act. For questions about the collection of personal information, contact

The Black Gold School Division Business Title/Organization		780-955-6025 Business Phone Number	
3rd Floor, 1101-5th Street	Nisku	AB	T9E 7N3
Address	City or Town	Province	Postal Code
LOCAL JURISDICTION: The Black Gold School Division		, PROVINCE OF ALBERTA	
Calendar year of disclosure: 2025		, FRO	OVINCE OF ALBERTA
Full Name of Candidate: Michelle Elizabe	eth Harper		
Candidate's Mailing Address:			
New Sarept	a		Alberta
Postal Code:			, rubei ia
This form, including any contributor inform	mation from line 2, is a public document.		
	Campaign Revenue for Calendar Year		
CAMPAIGN CONTRIBUTIONS:			
Total amount of contributions of \$50.00 or less			\$0.00
Total amount of all contributions of \$50.01 and address (attach listing and amount)	and greater, together with the contributor's name		
NOTE: For lines 1 and 2, include all money a	nd valued personal property, real property or servic	e contributions	3.
Deduct total amount of contributions returned			\$0.00
4. NET CONTRIBUTIONS (line 1 + 2 - 3)			\$0.00
OTHER SOURCES:			•
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			\$0.00
9. TOTAL OTHER SOURCES (add lines 5, 6, 7 and 8)			\$0.00
OTAL REVENUE			\$0.00
0. Total campaign revenue for calendar year	(add lines 4 and 9)		\$0.00
Cai	mpaign Expenditures for Calendar Year		40.00
 Total paid campaign expenses 			\$0.00
12. Total unpaid campaign expenses			\$0.00
3. Total campaign expenses (add lines 11 and 12)			
ne candidate must attach an itemized	expense report to this form	-	\$0.00
ampaign Surplus (Deficit) for Calenda	ar Year (deduct line 13 from line 10)		\$0.00
	penses or received contributions of \$50 000 or	more must a	ittach a review

ATTESTATION OF CANDIDATE

I certify that to the best of my knowledge this document and all attachments accurately reflect the information required under section 147.4 of the Local Authorities Election Act.

Date yyyy-mm-dd Wlichell Carper.

Signature of Candidate

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 FILE A FALSE STATEMENT