ELECTIONS NOVA SCOTIA

Financial Return for Candidate Statement of Donations in Kind

Elections Act Section 240 & 248

Form 2-3B

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE NAME	DATE
ELECTORAL DISTRICT	PARTY AFFILIATION (IF ANY)

DATE	LAST NAME	FIRST NAME	CIVIC ADDRESS	COMMUNITY	POSTAL CODE	AMOUNT
TOTAL : (ENTER ON FORM 2-3)						