4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME			GENERAL VOTING DAY (YYYY)MM/	-
TIMATHY Willi	in LAVER	² 7	2014/11/19	,
BALLOT NAME (IF DIFFERENT FROM ABOVE)			OFFICE SOUGHT (MAYOR, COUNCI	LLOR ETC.)
TIM LAVER			COUNCILLOR	
I I MAII ING ADDRESS			PHONE NO.	
1480-18 St. NE.			250.804.49. EMAIL (IF AVAILABLE) TIMLAVERY @	46
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)	-
Salmon ARM	·	VIE 279	7: Navenue	Shawa
			CIMENVERYE	, 1)
JURISDICTION	4 .			
City of Salmon	HRM		· · · · · · · · · · · · · · · · · · ·	
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELEC	CTORAL AREA (IF APPLI	CABLE)		
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION	ON (IF APPLICABLE)	e		
····	•			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION	N (IF APPLICABLE)		, , , , , , , , , , , , , , , , , , ,	
				
		***************************************	3 0100 Pel po 10 1 1 1 Pe	
	IRST NAME		MIDDLE NAME	
FINANCIAL AGENT'S MAILING ADDRESS	11M.		William	
FINANCIAL AGENT'S MAILING ADDRESS	, ,	·· e	PHONE NO	
As Above & Acted as my a	run tinanci	al asent		
CITY/TOWN	·	POSTAL CODE	EMAIL (IF AVAILABLE)	
	•			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	16.15		Laurenta annualata faura 1998	
	if there	were previous financia	il agents, complete form 4238.	
Tick if candidate was registered as a third pa	irty aponaor	Tick if candidate a	cted as a campaign organizer	,
	-			•
This disclosure statement includes the following for	oms:			
Declarations and Campaign Accounts -	Form 4224 12	· Summer	y of Election Expenses - Form	4229
Déclarations aug Cambaign Accours -	· FUIII 4221 (V	QUIIIIIQI.	y of Election Expenses 1 onn	TARV
Statement of Income and Expenses -	Form 4222	Transfers Given I	o Élector Organization 🦂 Form	4230
didiofficity investor and Expenses	· · · · · · · · · · · · · · · · · · ·	(1-11)		<u></u>
Summary of Campaign Contributions by Class -	Form 4223 V	Olher	Permissible Payments – Form	الأطام 4231 الم
, , ,				
Significant Contributors (\$100 or more)	Form 4224 🔽	\$h	ared Election Expense – Form	4232
Prohibited Campaign Contributions -	Form 4225 🔽	Transfers Between Cand	lidate's Own Accounts - Form	4233
,				
Transfers Received from Elector Organization -	Form 4226 🔽	Disburser	ment of Surplus Funds - Form	4234
				I. A r
Olher Permissible Deposits -	Form 4227 🔽	Free Adver	lising from Jurisdiction — Form	4235
•			•	· · · · · · · · · · · · · · · · · · ·
Fundralsing Function Ticket Sales -	Form 4228	Pre	/lous Financial Agents – Form	4236

(14/08)

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE TIMOTHY William Lavery.	_
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and ac required under the Local Elections Campaign Financing Act (LECFA).	curately discloses the information
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD)
T. W. Lavery.	2015/01/28
PRINTED NAME OF CANDIDATE Timothy William LAVERY.	
THOING DETITIONS PROPERTY.	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
T.W. Lavery -acting somy our financial agent PRINTED NAME OF FINANCIAL AGENT TIMOTHY William LAVERY.	2015/01/28
PRINTED NAME OF FINANCIAL AGENT	
I MOTHY William LAVERY.	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION	
Salmon ARM SAVINGS + CREditLewion	
ADDRESS 370 Lakeshape Drive. P.O. Bax 868 B.	C VIE 4N9
NAME OF SAVINGS INSTITUTION	
AGRICIAN	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
	ļ
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
10-200- 3	

(14/08)

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE TIMOTHY William LANRRY	
Total value of campaign contributions from all sources (from box C on form 4223)	3, 266.96
Transfers received from elector organization (from box A on form 4226)	
Total other permissible deposits (from box A on form 4227)	0.08
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	
Total Income (sum of above boxes)	3,267,04 A
Election expenses (from box A on form 4229)	5,053.90
Transfers to elector organization (from box A on form 4230)	
Total other permissible payments (from box A on form 4231)	110.06
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233) $\Big[$	
Amount of surplus funds disbursed (from box A on form 4234)	106.08
Total Expenditures (sum of above boxes)	5,270,04 B

(14/08)

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Jimothy William Lavery	
	•
	All Contributions
Individuals	3,266.96
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	·- -
Total ·	\$ 3,266.96 A
Anonymous contributions	\$ B
Total contributions (A + B)	\$ 3,266.96 C
Total significant contributions (must equal box A on all forms 4224)	\$ 2, 406.96
Total contributions of less than \$100	\$ 86000
Number of contributors who gave less than \$100	# 19
Number of anonymous contributors	# \\ \(\)

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	TIMOTHY WILLIAM LAN	ERY.	LOUIT IN THE STATE OF THE STATE	OF 1
DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR (For class 2, 3, 4, 5 & 8, înclude full names of two directors)	ADDRESS OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6 only)	CLA\$\$*	.VALUE OF CONTRIBUTION
2014/09/30	Thomas K. KOLKIND			250 00
2014/09/30	Adeline E. Kolkind		1	250 "
2014/10/27	Bill Grainger.		/	200 00
2014/11/07	TIN LAVERY		1	1065 60
2014/10/15	TIM LAVERY		1	89 ⁵⁵
14/10/20	Tim LAVERY		1	41.97
14/09/29	TIM LAVERY		1	13.00
14/09/25	TIM LAUERY		1	155.38
14/10/07	TIM LAVERY		1.	120.96
14/10/14	TIM LAVERY		/	23.7 7
14/10/21	TIM LAVERY		1.	82.77
14/11/14	TIM LAVERY		1	10.27
14/10/11	TIM LAVERY		/	8 59
14/09/26	TIM LAVERY TIM LAVERY		1	95.10
		•		
F NEEDED, ATTACH AE CLASS OF CONTRIBU 1 – INDIVIDUAL, 2 – CC 4 – TRADE UNION, 5 –		CIAL ORGANIZATION CONTR ONTRIBUTOR	TOTAL HBUTIONS	2,406.96

(14/08)

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



Attach additional forms If necessary. RECEIVED FROM DATE REDGIVED \$ VALUE RETURNSD OR DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD) OR OR (YYYY/MM/DD) OR OR (YYYY/MM/DD) OR (YYYYY/MM/DD) OR (YYYYYYMM/DD) OR (YYYYYMM/DD) OR (YYYYYYMM/DD) OR (YYYYYMM/DD) OR (YYYYYYMM/DD) OR (YYYYYMM/DD) OR (YYYYYMM/DD) OR (YYYYYYMM/DD) OR (YYYYYYMM/DD) OR (YYYYYMM/DD) OR (NAME OF CANDIDATE INCO-	thy William	•		/	PAGE /
RECEIVED (YYYYMM/DD) ANONYMOUS RETURNED (YYYYMM/DD) STATURED (YYYYMM/DD) ANONYMOUS RECEIVED (YYYYMM/DD) ANONYMOUS RECEIVED ANONYMOUS RECEIVED ANONYMOUS RECEIVED (YYYYMM/DD) ANONYMOUS RECEIVED Complete this field if the prohibited campaign contribution was received from an individual: NAME OF INDIVIDUAL Complete these fields if the prohibited campaign contribution was received from an organization: NAME OF ORGANIZATION CLASS' MAILING ADDRESS CLASS' CLASS'	Attach additio	nal forms If necessary	<i>.</i>			and an
DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED Complete this field if the prohibited campaign contribution was received from an individual: NAME OF INDIVIDUAL Complete these fields if the prohibited campaign contribution was received from an organization: NAME OF ORGANIZATION CLASS' MAILING ADDRESS		RECEIVED	\$ VALUE	RETURNED	OR	ELECTIONS BC
Complete this field if the prohibited campaign contribution was received from an individual: NAME OF INDIVIDUAL Complete these fields if the prohibited campaign contribution was received from an organization: NAME OF ORGANIZATION CLASS* MAILING ADDRESS						
Complete these fields if the prohibited campaign contribution was received from an organization: NAME OF ORGANIZATION CLASS* MAILING ADDRESS	DESCRIPTION OF HOW THE PROHIBITED	CONTRIBUTION WAS RECEIV	/ED			
Complete these fields if the prohibited campaign contribution was received from an organization: NAME OF ORGANIZATION MAILING ADDRESS	Complete this field if the profile	lted campalgn contrib	oution was receive	d from an individual:		
NAME OF ORGANIZATION CLASS* MAILING ADDRESS	NAME OF INDIVIDUAL					•
MAILING ADDRESS	Complete these fields if the pro	hibited campaign/con	tribution was rece	ived from an organiz	ation:	
	NAME OF ORGANIZATION		•			CLASS* ,
NAME OF DIRECTOR	MAILING ADDRESS				•	
	NAME OF DIRECTOR		NAME OF DIRE	CTOR		
LASSES OF CONTRIBUTORS: - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION, - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER	ASSES OF CONTRIBUTORS: - INDIVIDUAL, 2 - CORPORATION, 3 - UNIN- TRADE UNION, 5 - NON-PROFIT ORGANI	CORPORATED BUSINESS/COATION, 6 - OTHER	OMMERCIAL ORGANIZAT	TON.		

14/08)

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	TIMOTHY WILLAN	u Lovepy	PAGE OF /
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF . TRANSFER
	,		
	A .		
,			
		1	
			•
include legal name if diffa	ereni than ballot name.	TOTAL	Α

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE

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NAME OF CANDIDATE	7	Inothy William Lovery			PAGE /
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION			ТИИОМА
2014/10/31	I	Interest			0.03
2014/11/30	エ	Interest Interest			0.04
2014/12/31		Interest	٠		0.01
,					
			,		•
			•		
		A SAME OF THE SAME	•		,
TYPE: - Interest		Т	OTAL	А	0.08

D - Dividende of sheres paid by credit union
S - Surplus funds from previous election returned by jurisdiction
F - Fundraising income not reported as a campaign contribution
O - Other (describe)

(14/08)

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE 7 I MOTHY	Willia	m Lavery		PAGE /
DATE OF EVENT (YYYY/MM/DD) DESCRIPTION	N OF FUNDRAISING E	VENT	-24100	
Income reported as campaign contribution	ns ·			Tick If
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Charge per Ticket Varies
Purchases by organizations			1	
Purchases by Individuals of more than \$250 worth of tickets				
Purchases by individuals of tickets that are more than \$50 each				
Total ii	ncome reported as	s campaign contributions		
Remember to report all campaign contribution and if applicable, on form 4224 - Significant	itions on form 42 nt Contributors (\$	23 - Summary of Camp 100 or more).	aign Contribution	ns by Class,
Other income not reported as campaign of	ontributions	<i>F</i>	•	
	Number of Tickets Sold	/ Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by individuals of tickets of \$50 or less				

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE TIMOTHY William Lau	iery.	
, ,	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	657.69	657.69
Internet	13.00	
Newspaper, magazine, journal	817.77	817.77
Radio		
. Signs and biliboards	2384.74	2,229.36
Television		
Olher advertising	9.5.10	
CAMPAIGN ADMINISTRATION		
· Salaries and wages		
Rent, Insurance and utilities		
Courier and postage	1065.60	1065.60
Furniture and equipment		 ·
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions.		
Research and polling		
Interest		
XCLUSIONS THAT MUST BE REPORTED	······································	<u> </u>
Personal blackion expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
ther expenses (describe) Then k You Carb / Dostage	20.00	,
Total Expenses	A 5053.90	B 4770,42
umn A - Report the value of all election expenses for goods and services used in the campaign perio campaign period is from January 1, 2014 to November 15, 2014. umn B - Report the value of all election expenses for goods and services used in the election procee		

(14/08)

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE

ELECTIONS (PM.) A non-parlisan Office of the Legislature

	•	·	
NAME OF CANDIDATE	Timothy William.	LAVERY	PAGE (
DATE OF TRANSFER (YYYY/MH/IDD)	BALLOT NAME OF ELECTOR ORGANIZATION	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
			
		<i>/</i>	
•			
	· / .		
		<i>f</i>	
		/ - .	
~		<i>1 </i>	
		· ·	
	<u> </u>		·
		•	
lso include legal name if dil	fferent than bellot neme.	TOTAL .	A

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	1	I MOTHY WILLANDRY		PAGE /
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION		AMOUNT
2014/11/30	B	Bank Fees- Service Chg.		1.65
2014/12/31	B	Bonk Fees - Sorvice Chg.		1.10
2014/11/21	0	Thank You Ad - Find my AM		36.75
2014/11/19	0	Thank You H - Salman Am Observer		70.56
		-·····································		
		•		

-				
	•			
				. •
TYPE: B – Bank fees		TOTAL	A	110.06

Themses section expense that was not us
 F - Payments made for fundrelsing purposes
 N - Nomination deposit
 O - Other (describe)

4232 - SHARED ELECTION EXPENSE LOCAL ELECTIONS CANDIDATE





~						
NAME OF CANDIDATE TIMOTHY WILL	LIAM LAVERY	PAGE / OF /				
DESCRIPTION OF SHARED EXPENSE						
		7 ·				
Total value of shared election expense						
/	Candidate's portion of	shared election expense*				
Amount paid directly to supplier (if applicable)						
Amount of simbursements given to other candidate(s)						
Amount of reimbursements received from other candidates						
*Note: Remember to Include your portion of	of the shared expense as an	election expense on form 4229 - Summary of				
Election Expenses.						
Full names of other candidates with whom	the expense was shared:					
LAST NAME	FIRST NAME	MIODLE NAME				
		·				

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Timothy William LAVERY	PAGE OF · /				
Transfers between candidate's own campaign accounts in same jurisdiction						
	PURPOSE	AMOUNT				

	1					
	ate's own campaign accounts in other jurisdictions	ALIONDE				
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT				
	/ /-					
	/ .''					
•						
**************************************	TOTAL	Α				
ensfers to candidate's	s own campaign accounts in other jurisdictions					
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT				
(11117 nam ,		•				
	TOTAL	h				
	TOTAL	<u> B </u>				
	The amounts in boxes A and B must be carried forward to form 4222.					

(14/08)

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Timothy William LAVERY					
	•					
	Balance remaining in campaign account(s) after payment of all expenses	106.08 A				
	1,706.96 B					
Amount reimbursed	Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign 106.08 C					
	2015/01/27					
If the amount in E	If the amount in Box D is \$500 or more, it must be paid to the jurisdiction in which the candidate ran for election. Provide the date of payment (YYYY/MM/DD).					
If the amount in Box D is less than \$500 provide details of how it was disbursed.						
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT .				
<u> </u>	<u> </u>	,				
	· .					
		, ve-				
		\				

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



		\			
NAME OF CANDIDATE					
The state of the s	Timothy Willia	1 /M/504			
<u> </u>	//MOING WITHE	KI 25020~			
Free advertising provided by jurisdiction					
DAYE ADVERTISING WAS TRANSMITTED (YYYY/MM/PP)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)			
11					
	N				
		1			
	/.				
		·			

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE TIMOTHY WILLAM Lavery	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME .
FINANCIAL AGENT MAILING ADDRESS	prone no.
CITY/TOWN POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	PHONE NO.
CITY/TOWN POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	PHONE NO.
CITY/TOWN POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (XYYY/MM/DD)	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	PHONE NO.
CITY/TOWN POSTAL CODE	EMAIL (IF AVAILABLE)