4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment #

CANDIDATE'S FULL NAME MICHELE LOMBARDI			GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15
BALLOT NAME (IF DIFFERENT FROM ABOVE) MIKE LOMBARDI			OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) SCHOOL TRUSTEE
MAILING ADDRESS			PHONE NO.
513 - 2268 REDBUD LANE			604-306-6948
CITY / TOWN	POSTAL COD		EMAIL (IF AVAILABLE)
VANCOUVER	V6K	4S6	mikelombardi@telus.net
JURISDICTION			
SCHOOL DISTRICT 39			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPI	LICABLE)		
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) VISION VANCOUVER .			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) VISION VANCOUVER ELECTOR ASSOCIATION			·
FINANCIAL AGENT'S LAST NAME FIRST NAME KANG OPREET			MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.
4635 STATION-MAIN POBOX 4635 STATION	MAIN		604-568-6913
CITY / TOWN	POSTAL CODE		EMAIL (IF AVAILABLE)
VANCOUVER EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	V6B	4A1	FINANCIAL.AGENT@VOTEVISION.CA
2013/12/01 2014/05/05- If the	re were previo	us financi	al agents, complete form 4236.
Tick if candidate was registered as a third party sponsor	Tick if o	candidate a	acted as a campaign organizer
This disclosure statement includes the following forms:			
Declarations and Campaign Accounts — Form 4221 🔀		Summa	ry of Election Expenses - Form 4229 X
Statement of Income and Expenses - Form 4222 X	Trans	fers Given	to Elector Organization - Form 4230 X
Summary of Campaign Contributions by Class - Form 4223 X		Other	Permissible Payments - Form 4231 X
Significant Contributors (\$100 or more) - Form 4224		Sh	nared Election Expense - Form 4232 X
Prohibited Campaign Contributions – Form 4225 X	Transfers Be	tween Can	didate's Own Accounts - Form 4233 X
Transfers Received from Elector Organization - Form 4226 X		Disburse	ement of Surplus Funds - Form 4234 X
Other Permissible Deposits - Form 4227 X		Free Adve	rtising from Jurisdiction - Form 4235 X
Fundraising Function Ticket Sales - Form 4228 X		Pre	evious Financial Agents - Form 4236 X

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



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Amendment/#

				/
CANDIDATE'S FULL NAME MICHELE LOMBARDI				GENERAL VOTING DAY (YYYY/MM/DD) 20,14/11/15
				l / I
BALLOT NAME (IF DIFFERENT FROM ABOVE) MIKE LOMBARDI				OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) SCHOOL TRUSTEE
MAILING ADDRESS				PHONE NO.
513 - 2268 REDBUD LANE				604-396-6948
CITY / TOWN	F	POSTAL CODE		EMAIL (IF AVAILABLE)
VANCOUVER	,	V6K	4S6	mikelombardi@telus.net
JURISDICTION				
SCHOOL DISTRICT 39				
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL A	REA (IF APPLICAE	BLE)		
				1
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APP VISION VANCOUVER	PLICABLE)		,	
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPL	ICABLE)	-/-		
VISION VANCOUVER ELECTOR ASSOCIATION	<u> </u>			
FINANCIAL AGENT'S LAST NAME FIRST NAM	ME /	<u> </u>		MIDDLE NAME
KANG OPREE	т /			
FINANCIAL AGENT'S MAILING ADDRESS				PHONE NO.
4635 STATION MAIN				604-568-6913
CITY/TOWN	P	OSTAL CODE		EMAIL (IF AVAILABLE)
VANCOUVER		V6B	4A1	FINANCIAL.AGENT@VOTEVISION.
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2014/05/05	If there w	vere previou	s financia	al agents, complete form 4236.
Tick if candidate was registered as a third party spor	nsor	Tick if ca	andidate a	cted as a campaign organizer
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Prohibited Campaign Contributions - Form	4225 🗙 Tr	ransfers Bet	ween Can	didate's Own Accounts - Form 4233 X
Transfers Received from Elector Organization - Form	4226 ×		Disburse	ment of Surplus Funds - Form 4234 X
Other Permissible Deposits - Form	4227 ×	F	ree Adve	tising from Jurisdiction – Form 4235 🔀
Fundraising Function Ticket Sales - Form	4228 ×		Pre	vious Financial Agents – Form 4236 🔀

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	
MICHELE LOMBARDI	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure state	ment completely and accurately discloses the information
required under the Local Elections Campaign Financing Act (LECFA).	
SIGNATURE QF CANDIDATE	DATE: (YYYY/MM/DD)
	2015/02/09
PRINTED NAME OF CANDIDATE Ky Lombison	
Mike Lamsian	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
	2015/02/09
PRINTED NAME OF FINANCIAL AGENT	
L Opplet Kang	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION	
N/A	
ADDRESS	
The state of the s	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
TOTAL OF GAYINGO INCITION	
ADDRESS WOT Of A	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE MICHELE LOMBARDI		
Total value of campaign contributions from all sources (from box C on form 4223)		
Transfers received from elector organization (from box A on form 4226)		
Total other permissible deposits (from box A on form 4227)		
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)		ı
Total Income (sum of above boxes)	0.00	Α
Election expenses (from box A on form 4229)		
Transfers to elector organization (from box A on form 4230)		
Total other permissible payments (from box A on form 4231)		
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)		i
Amount of surplus funds disbursed (from box A on form 4234)		
Total Expenditures (sum of above boxes)	0.00	В

Markey Del m Str.

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE MICHELE LOMBARDI		
	All Contributions	_
Individuals	0.00	
Corporations	0.00	
Unincorporated Business/Commercial Organizations	0.00	
Trade Unions	0.00	
Non-profit Organizations	0.00	
Other Identifiable Contributors	0.00	
Total	\$ 0.00	Α
Anonymous contributions	\$ 0.00	В
Total contributions (A + B)	\$ 0.00	С
Total significant contributions (must equal box A on all forms 4224)	\$ 0.00	
Total contributions of less than \$100	\$ 0.00	-
Number of contributors who gave less than \$100	# 0	
Number of anonymous contributors	# 0	

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



WICHELE LOMBAR	RDI			OF C
DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6, include full names of two directors)	ADDRESS OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6 only)	CLASS*	VALUE OF CONTRIBUTION
NEEDED, ATTACH ADDIT LASS OF CONTRIBUTOR - INDIVIDUAL, 2 - CORP	IONAL FORMS 1: ORATION, 3 - UNINCORPORATED BUSINESS/COM NUMBER OF GRANIZATION S - OTHER IDENTIFIES	MMERCIAL ORGANIZATION CONT	TOTAL RIBUTIONS	A 0.00

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE MICHELE LOMBARDI					PAGE 1
INSTRUCTIONS: Complete one si	neet for each prohib Il forms if necessary		tribution received.		·
RECEIVED FROM INDIVIDUAL ORGANIZATION	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
☐ ANONYMOUS					
Complete this field if the prohibit NAME OF INDIVIDUAL			d from an individual	·:	
Complete these fields if the prohi	bited campaign con	tribution was recei	ved from an organi	zation:	
NAME OF ORGANIZATION					CLASS*
MAILING ADDRESS				, <u>, , </u>	
NAME OF DIRECTOR		NAME OF DIRE	CTOR		

*CLASSES OF CONTRIBUTORS:

1 – INDIVIDUAL, 2 – CORPORATION, 3 – UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION, 4 – TRADE UNION, 5 – NON-PROFIT ORGANIZATION, 6 – OTHER



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4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION



LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTER	
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NAME OF CANDIDATE MICHELE LOMBA	ARDI		PAGE 1 OF 1
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
		A	

	,		
		,	
Also include legal name if	different than ballot name.	TOTAL	A 0.00

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT

ELECTIONS A non-partisan Office of the Legislature

LOCAL ELECTIONS CANDIDATE

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	<u> </u>			, OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION		AMOUNT
			· 	
		ZOUR PROPERTY OF THE PARTY OF T	,	
: erest	,		TOTAL	А

This form is available for public inspection.

ORIGINAL — ELECTIONS BC

PLEASE KEEP A COPY FOR YOUR RECORDS

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE



SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD

a) (a	ELECTIONS A non-partisan Office of the L	5
	A non-partisan Office of the L	egislature

MICHELE LOMBARDI					PAGE
	O FOOD DELON	OF ELDIDONO EV	- 1.17		OF
` '		OF FUNDRAISING EV	:NI		
NA	NA				
Income reported as campaign co	ontribution	S			
		Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organ	nizations		117		
Purchases by individuals of m \$250 worth o					
Purchases by individuals on that are more than \$					
	Total in	come reported as	campaign contributior	าร	
				npaign Contribution	ns by Class,
Remember to report all campaign and if applicable, on form 4224 -	Significan	t Contributors (\$		npaign Contribution	ns by Class,
	Significan	t Contributors (\$		npaign Contribution Total Charges Collected	ns by Class, Tick if Charge per Ticket Varies

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers		
Internet		
Newspaper, magazine, journal		
Radio		
Signs and billboards		
Television		
Other advertising		
CAMPAIGN ADMINISTRATION		
Salaries and wages		
Rent, insurance and utilities		
Courier and postage		
Furniture and equipment		
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions		
Research and polling		
Interest		
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe)	•	
Total Expenses	Α 0.	00 B 0.
	1	

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE MICHELE LOMB.	ARDI		PAGE OF OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER

	(S)		
	1 (apr 2 · 97)		
	1.19 550		
'Also include legal name if	different than ballot name.	TOTAL	A 0.00

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE MICHELE LOMBA	ARDI				PAGE OF	1
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION		MA	OUNT	
						·

		HIN THOUSANT TO THE PARTY OF TH	<u></u>			
						1
	-					
TYPE: B - Bank fees F - Intended election expe	nee that wa	l e e e e e e e e e e e e e e e e e e e	A			0.00

N – Nomination deposit
O – Other (describe)

F - Payments made for fundraising purposes

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE





a). (a)	ELECTIONS A non-partisan Office of the Leg	71, 2 7
	A non-partisan Office of the Leg	islature

NAME OF CANDIDATE MICHELE LOMBARDI			PAGE 1		
DESCRIPTION OF SHARED EXPENSE NA					
	Total value of shared	election expense	0.00		
	Candidate's portion of shared election expense*				
Amount paid directly to supplier (if applicable)					
Amount of reimbursements given to other candidate(s)					
	Amount of reimbursements received from	n other candidates	0.00		
Full names of other candidates with w	hom the expense was shared:	MIDDLE	NAME		
	-	MIDDLE	NAME		
		:			
		· · · · · · · · · · · · · · · · · · ·			

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE





ICHELE LOMBARDI				OF
nsfers between candic	ate's own campaign accounts in same jurisdiction			
	PURPOSE			AMOUNT
nsfers from candidate'	s own campaign accounts in other jurisdictions			
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)			AMOUNT
	1.000			
		TOTAL	Α	0.0
nefere to candidate's o	wn campaign accounts in other jurisdictions			
DATE OF TRANSFER	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)			AMOUNT
(YYYY/MM/DD)			<u> </u>	
(YYYY/MM/DD)				
(YYYY/MM/DD)				
(YYYY/MM/DD)				
(YYYY/MM/DD)	。			
(YYYY/MM/DD)				
(YYYY /MM/DD)		TOTAL	В	0.0

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE MICHELE LOMBA	RDI	
WHO TELE ECITION		
	Balance remaining in campaign account(s) after payment of all expenses	0.00 A
	Total amount of campaign contributions from candidate	0.00 B
Amount reimbursed t	o candidate from campaign account for the candidate's contributions to their campaign	0.00 C
	Date of reimbursement to candidate (YYYY/MM/DD)	0
	Amount of remaining surplus funds (after any reimbursement under box C)	0.00 D
If the amount in E	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).	0
If the amount in Bo	ox D is less than \$500 provide details of how it was disbursed.	
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
,		

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE				
MICHELE LOMBARDI				
Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
(YYYY/MM/DD)	3 T T T T T T T T T T T T T T T T T T T			
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4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE MICHELE LOMBARDI	,		
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)		1 1	
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)		1 1	
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	3 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	BARRY MAN	\$ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	PHONE NO.
CITY/TOWN	10: 27	POSTAL CODE	EMAIL (IF AVAILABLE)
		and the second s	