

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

Call to confirm receiving
LOCAL ELECTIONS CANDIDATE



250-833-8188

PLEASE PRINT IN BLOCK LETTERS

Please call to confirm Amendment #

CANDIDATE'S FULL NAME <i>Debbie Lynn Cannon</i>		GENERAL VOTING DAY (YYYY/MM/DD) <i>2014/11/15</i>
BALLOT NAME (IF DIFFERENT FROM ABOVE) <i>DEBBIE CANNON</i>		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <i>MAYOR</i>
MAILING ADDRESS <i>11-2nd St SE</i>		PHONE NO. <i>250 833 8188</i>
CITY/TOWN <i>Salmon Arm B.C</i>	POSTAL CODE <i>V1E 1G8</i>	EMAIL (IF AVAILABLE) <i>dandb.cannon@hotmail.com</i>

JURISDICTION
SALMON ARM

ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE)

BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)

LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)

FINANCIAL AGENT'S LAST NAME <i>CANNON</i>	FIRST NAME <i>Debbie</i>	MIDDLE NAME <i>Lynn</i>
FINANCIAL AGENT'S MAILING ADDRESS <i>11-2nd St SE Salmon Arm</i>		PHONE NO. <i>250-833-8188</i>
CITY/TOWN <i>Salmon Arm</i>	POSTAL CODE <i>V1E 1G8</i>	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <i>2014/10/14</i>	If there were previous financial agents, complete form 4236.	

Tick if candidate was registered as a third party sponsor

Tick if candidate acted as a campaign organizer

This disclosure statement includes the following forms:

- | | |
|--|--|
| Declarations and Campaign Accounts - Form 4221 <input checked="" type="checkbox"/> | Summary of Election Expenses - Form 4229 <input checked="" type="checkbox"/> |
| Statement of Income and Expenses - Form 4222 <input checked="" type="checkbox"/> | Transfers Given to Elector Organization - Form 4230 <input checked="" type="checkbox"/> |
| Summary of Campaign Contributions by Class - Form 4223 <input checked="" type="checkbox"/> | Other Permissible Payments - Form 4231 <input checked="" type="checkbox"/> |
| Significant Contributors (\$100 or more) - Form 4224 <input checked="" type="checkbox"/> | Shared Election Expense - Form 4232 <input checked="" type="checkbox"/> |
| Prohibited Campaign Contributions - Form 4225 <input checked="" type="checkbox"/> | Transfers Between Candidate's Own Accounts - Form 4233 <input checked="" type="checkbox"/> |
| Transfers Received from Elector Organization - Form 4226 <input checked="" type="checkbox"/> | Disbursement of Surplus Funds - Form 4234 <input checked="" type="checkbox"/> |
| Other Permissible Deposits - Form 4227 <input checked="" type="checkbox"/> | Free Advertising from Jurisdiction - Form 4235 <input checked="" type="checkbox"/> |
| Fundraising Function Ticket Sales - Form 4228 <input checked="" type="checkbox"/> | Previous Financial Agents - Form 4236 <input checked="" type="checkbox"/> |

This form is available for public inspection.
ORIGINAL -- ELECTIONS BC
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Questions? Contact: Privacy Officer, Elections BC
1-800-661-8693 PO Box 0276 9th Prov Govt, Victoria BC V8W 0J0

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

**Call to confirm receiving - SEE AMENDMENT*
 LOCAL ELECTIONS CANDIDATE
 PLEASE PRINT IN BLOCK LETTERS
 250-833-8188 **Please call to confirm**
 Amendment #



CANDIDATE'S FULL NAME Debbie Lynn Cannon		GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) MAYOR	
MAILING ADDRESS 11-2nd St SE		PHONE NO. 250 833 8188	
CITY/TOWN Salmon Arm B.C	POSTAL CODE V1E 1G8	EMAIL (IF AVAILABLE) dandb.cannon@hotmail.com	
JURISDICTION			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE)			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
FINANCIAL AGENT'S LAST NAME CANNON	FIRST NAME Debbie	MIDDLE NAME Lynn	
FINANCIAL AGENT'S MAILING ADDRESS 11-2nd St SE Salmon Arm		PHONE NO. 250-833-8188	
CITY/TOWN Salmon Arm	POSTAL CODE V1E 1G8	EMAIL (IF AVAILABLE)	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2014/10/19	If there were previous financial agents, complete form 4236.		

Tick if candidate was registered as a third party sponsor Tick if candidate acted as a campaign organizer

- This disclosure statement includes the following forms:
- | | |
|--|--|
| Declarations and Campaign Accounts - Form 4221 <input checked="" type="checkbox"/> | Summary of Election Expenses - Form 4229 <input checked="" type="checkbox"/> |
| Statement of Income and Expenses - Form 4222 <input checked="" type="checkbox"/> | Transfers Given to Elector Organization - Form 4230 <input checked="" type="checkbox"/> |
| Summary of Campaign Contributions by Class - Form 4223 <input checked="" type="checkbox"/> | Other Permissible Payments - Form 4231 <input checked="" type="checkbox"/> |
| Significant Contributors (\$100 or more) - Form 4224 <input checked="" type="checkbox"/> | Shared Election Expense - Form 4232 <input checked="" type="checkbox"/> |
| Prohibited Campaign Contributions - Form 4225 <input checked="" type="checkbox"/> | Transfers Between Candidate's Own Accounts - Form 4233 <input checked="" type="checkbox"/> |
| Transfers Received from Elector Organization - Form 4226 <input checked="" type="checkbox"/> | Disbursement of Surplus Funds - Form 4234 <input checked="" type="checkbox"/> |
| Other Permissible Deposits - Form 4227 <input checked="" type="checkbox"/> | Free Advertising from Jurisdiction - Form 4235 <input checked="" type="checkbox"/> |
| Fundraising Function Ticket Sales - Form 4228 <input checked="" type="checkbox"/> | Previous Financial Agents - Form 4236 <input checked="" type="checkbox"/> |

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 1-800-661-8003 PO Box 6276 Stn Prov Govt, Victoria BC V8W 6J8

LOCAL ELECTIONS CAMPAIGN FINANCING

(14/00)

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: Debbie Cannon

Declaration:

I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the Local Elections Campaign Financing Act (LECFCA).

SIGNATURE OF CANDIDATE: [Signature] DATE: (YYYY/MM/DD) 2015/01/27

PRINTED NAME OF CANDIDATE: Debbie Cannon

SIGNATURE OF FINANCIAL AGENT: [Signature] DATE: (YYYY/MM/DD) 2015/01/27

PRINTED NAME OF FINANCIAL AGENT: Debbie Cannon

Campaign accounts:

NAME OF SAVINGS INSTITUTION: SASCU Credit Union
ADDRESS: 370 Lakeshore Dr. NE Salmon Arm B.C.

NAME OF SAVINGS INSTITUTION: _____
ADDRESS: _____

NAME OF SAVINGS INSTITUTION: _____
ADDRESS: _____

NAME OF SAVINGS INSTITUTION: _____
ADDRESS: _____

4222 - STATEMENT OF INCOME AND EXPENSES

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

Debbie Lynn Cannon

Total value of campaign contributions from all sources (from box C on form 4223)

5350

5800.00

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)

—

Total Income (sum of above boxes)

5350

A

5800.00

Election expenses (from box A on form 4229)

5799.64

5738.04

Transfers to elector organization (from box A on form 4230)

—

Total other permissible payments (from box A on form 4231)

61.60

Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)

—

Amount of surplus funds disbursed (from box A on form 4234)

—

Total Expenditures (sum of above boxes)

5799.64

B

4222 - STATEMENT OF INCOME AND EXPENSES

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

SEE AMENDMENT



NAME OF CANDIDATE

Debbie Lynn Cannon

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)

Total Income (sum of above boxes) A

Election expenses (from box A on form 4228)

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)

Amount of surplus funds disbursed (from box A on form 4234)

Total Expenditures (sum of above boxes) B

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE
Debbie Lynn Cannon

		All Contributions		
Individuals	9000			2100.00
Corporations	9350			3700.00
Unincorporated Business/Commercial Organizations	—			
Trade Unions	—			
Non-profit Organizations	—			
Other Identifiable Contributors				
Total	\$ 5350	A		5800.00
Anonymous contributions	\$ —		B	
Total contributions (A + B)	\$ 5350		C	5800.00
Total significant contributions (must equal box A on all forms 4224)	\$ 5350			5700.00
Total contributions of less than \$100	\$ 100			

Number of contributors who gave less than \$100 # 2

Number of anonymous contributors # —

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

SEE AMENDMENT

NAME OF CANDIDATE
Debbie Lynn Cannon

		All Contributions	
Individuals		2000.-	
Corporations		3350.	
Unincorporated Business/Commercial Organizations		—	
Trade Unions		—	
Non-profit Organizations		—	
Other identifiable Contributors			
Total	\$	5350.	A
Anonymous contributions	\$	—	B
Total contributions (A + B)	\$	5350	C
Total significant contributions (must equal box A on all forms 4224)	\$	5350	
Total contributions of less than \$100	\$	100	
Number of contributors who gave less than \$100	#	2	
Number of anonymous contributors	#	—	

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LOCAL ELECTIONS CAMPAIGN FINANCING

(1/1/01)

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: Debbie Cannon PAGE 5 OF 7

Table with 5 columns: DATE OF CONTRIBUTION (YYYY/MM/DD), FULL NAME OF CONTRIBUTOR, ADDRESS OF CONTRIBUTOR, CLASS, VALUE OF CONTRIBUTION. Rows include contributions from Gordon Erickson, Tip Top Trimming, Demilles, Tekemar, SC Fin. Investments, Toliver Advertising, and Debbie Cannon.

IF NEEDED, ATTACH ADDITIONAL FORMS

*CLASS OF CONTRIBUTOR:

- 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION, 4 - TRADE UNION, 6 - NON-PROFIT ORGANIZATION, 0 - OTHER IDENTIFIABLE CONTRIBUTOR

TOTAL CONTRIBUTIONS A 5750

5700

LOCAL ELECTIONS CAMPAIGN FINANCING (L.E.C.F.)

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS SEE AMENDMENT

NAME OF CANDIDATE: Debbie Cannon PAGE 5 OF 7

Table with 5 columns: DATE OF CONTRIBUTION (YYYY/MM/DD), FULL NAME OF CONTRIBUTOR (For class 2, 3, 4, 6 & 6, include full names of two directors), ADDRESS OF CONTRIBUTOR (For class 2, 3, 4, 6 & 6 only), CLASS, VALUE OF CONTRIBUTION. Rows include: 2014/10/22 Gord Erickson, Robert Robbins via 1st 4 #0864589 BC Ltd 973 Lakeshore Dr. Salmon Arm BC 2 1000. 2014/10/22 Bruce Cannon Tip Top Trimming 11-2nd St SE Salmon Arm BC 2 500. 2014/11/01 Brad Demille, K. Demille Demilles. 3710-10th Ave SW Salmon Arm BC 2 500. 2014/11/13 Richard Smith, Tekemar. 271 Ross St Salmon Arm BC 2 200. 2014/11/13 Mitchell, SC Fin. Investments INC. 100-700 Applewood Cres. Vancouver BC 2 1000. 2014/11/14 Toliver Advertising Box 1183 Salmon Arm BC 2 150. 2014/11/14 [Redacted] 1 2000.

IF NEEDED, ATTACH ADDITIONAL FORMS * CLASS OF CONTRIBUTOR: 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION 4 - TRADE UNION, 6 - NON-PROFIT ORGANIZATION, 8 - OTHER IDENTIFIABLE CONTRIBUTOR TOTAL CONTRIBUTIONS A 5350

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4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 1.2em; font-family: cursive;">Debbie Lynn Cannon</div>	PAGE 6 OF 77
INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received. Attach additional forms if necessary.	

RECEIVED FROM	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE SUBMITTED TO ELECTIONS BC (YYYY/MM/DD)
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION <input type="checkbox"/> ANONYMOUS		N/A			

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	
NAME OF DIRECTOR	NAME OF DIRECTOR

* CLASSES OF CONTRIBUTORS:
 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,
 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 0 - OTHER

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE

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NAME OF CANDIDATE <i>Debbie Lynn Cannon</i>	PAGE <i>7</i> OF <i>17</i>
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DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
	<i>N/A</i>		
TOTAL			A

*Also include legal name if different than ballot name.

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LOCAL ELECTIONS CAMPAIGN FINANCING (1/3/03)

**4227 - OTHER PERMISSIBLE DEPOSITS
TO CAMPAIGN ACCOUNT**
LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS



NAME OF CANDIDATE: Debbie Lynn Cannon PAGE 8
OF 17

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		N/A	
TOTAL			A

*TYPE:
 I -- Interest
 D -- Dividends of shares paid by credit union
 B -- Bonus funds from previous election returned by jurisdiction
 P -- Fundraising income not reported as a campaign contribution
 O -- Other (describe)

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1-800-661-8883 PO Box 9278 8th Prov Quad, Victoria BC V8W 0J0

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD

NAME OF CANDIDATE <i>Debbie Lynn Cannon</i>			PAGE <i>9</i>
			OF <i>17</i>
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT <i>N/A</i>		

Income reported as campaign contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations				<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>
Total income reported as campaign contributions				

Remember to report all campaign contributions on form 4223 - Summary of Campaign Contributions by Class, and if applicable, on form 4224 - Significant Contributors (\$100 or more).

Other income not reported as campaign contributions

	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				<input type="checkbox"/>

LOCAL ELECTIONS CAMPAIGN FINANCING (12/01)

4229 - SUMMARY OF ELECTION EXPENSES
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
DEBBIE CANNON

	Column A Election Expenses	Column B Election Proceedings Period Expenses
ADVERTISING		
Brochures, pamphlets and flyers	959.56	959.56
Internet	133.52	133.52
Newspaper, magazine, journal	163.80	163.80
Radio		
3202.82 Signs and billboards	3264.42	3264.42
Television		
Other advertising	687.31	687.31
CAMPAIGN ADMINISTRATION		
Salaries and wages		
Rent, insurance and utilities	150.-	150.-
Courier and postage		
Furniture and equipment		
Office supplies		
Professional services	441.-	441.-
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 A 5799.61 B 5799.61

Column A - Report the value of all election expenses for goods and services used in the campaign period. The campaign period is from January 1, 2014 to November 16, 2014. 5738.04

Column B - Report the value of all election expenses for goods and services used in the election proceedings period. The election proceedings period is from September 30, 2014 to November 16, 2014. 5738.04

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

SEE AMENDMENT

NAME OF CANDIDATE

ADVERTISING

	Column A Election Expenses	Column B Election Proceedings Period Expenses
Brochures, pamphlets and flyers	959.56	959.56
Internet	133.52	133.52
Newspaper, magazine, journal	163.80	163.80
Radio		
Signs and billboards	3264.42	3264.42
Television		
Other advertising	687.34	687.34

CAMPAIGN ADMINISTRATION

Salaries and wages		
Rent, insurance and utilities	150.-	150.-
Courier and postage		
Furniture and equipment		
Office supplies		
Professional services	441.-	441.-
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions		
Research and polling		
Interest		

EXCLUSIONS THAT MUST BE REPORTED

Personnel election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		

Other expenses (describe)

Total Expenses

A 5799.64

B 5799.64

Column A - Report the value of all election expenses for goods and services used in the campaign period. The campaign period is from January 1, 2014 to November 18, 2014.

Column B - Report the value of all election expenses for goods and services used in the election proceedings period. The election proceedings period is from September 30, 2014 to November 18, 2014.

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LOCAL ELECTIONS CAMPAIGN FINANCING (1A/01)

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: Debbie Lynn Cannon PAGE 10 OF 17

Table with 4 columns: DATE OF TRANSFER (YYYY/MM/DD), BALLOT NAME OF ELECTOR ORGANIZATION*, DESCRIPTION (IF NON-MONETARY), VALUE OF TRANSFER. Includes a 'TOTAL A' row at the bottom.

*Also include legal name if different than ballot name.

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4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE				PAGE
DATE (YYYY/MM/DD)	TYPE	DESCRIPTION	AMOUNT	OF
		N/A		11
Debbie Lynn Cannon				17
2014/09/30	E	STICKERS	60.61	
			TOTAL	A
				60.61

TYPE:
 B Bank from
 E (unused election expenses that was not used)
 F Payments made for fundraising purposes
 N Non-election deposit
 O Other (describe)

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 1-800-881-4008 PO Box 0276 Stn Prov Owl, Victoria BC V8W 9J1

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



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SEE AMENDMENT

NAME OF CANDIDATE

Debbie Lynn Cannon

PAGE 11 OF 17

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		N/A	
TOTAL			A

- *TYPE:
- B Bank loan
 - E Intended election expenses that were not used
 - F Payments made for fundraising purposes
 - N Non-election deposit
 - O Other (donation)

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4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE:

Debbie Lynn Cannon

PAGE 12

OF 17

DESCRIPTION OF SHARED EXPENSE:

N/A

Total value of shared election expense

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 other candidates

*Note: Remember to include your portion 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	MIDDLE NAME

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: Debbie L Cannon PAGE: 13 OF 17

Transfers between candidate's own campaign accounts in same jurisdiction

Table with columns: PURPOSE, AMOUNT. Handwritten entry: N/A

Transfers from candidate's own campaign accounts in other jurisdictions

Table with columns: DATE OF TRANSFER (YYYY/MM/DD), PURPOSE (INCLUDE NAME OF OTHER JURISDICTION), AMOUNT. Includes TOTAL A

Transfers to candidate's own campaign accounts in other jurisdictions

Table with columns: DATE OF TRANSFER (YYYY/MM/DD), PURPOSE (INCLUDE NAME OF OTHER JURISDICTION), AMOUNT. Includes TOTAL B

The amounts in boxes A and B must be carried forward to form 4222.

LOCAL ELECTIONS CAMPAIGN FINANCING

(14/00)

4234 - DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE Debbie Lynn Cannon

Balance remaining in campaign account(s) after payment of all expenses 0 A

Total amount of campaign contributions from candidate 2000 B

Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign 0 C

Date of reimbursement to candidate (YYYY/MM/DD) —

Amount of remaining surplus funds (after any reimbursement under box C) — D

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). — N/A

If the amount in Box 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



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE: Dobbie Lynn Cannon

Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, PLYER, ETC.)

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LOCAL ELECTIONS CAMPAIGN FINANCING

(1/0/0)

4236 - PREVIOUS FINANCIAL AGENTS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <i>Debbie Lynn Cannon</i>		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		
FINANCIAL AGENT'S LAST NAME	FIRST NAME <i>N/A</i>	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 (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)

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