

**4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT**

**LOCAL ELECTIONS CANDIDATE**



PLEASE PRINT IN BLOCK LETTERS

Amendment # \_\_\_\_\_

CANDIDATE'S FULL NAME <b>GEOFFREY MEGGS</b>		GENERAL VOTING DAY (YYYY/MM/DD) <b>2014/11/15</b>	
BALLOT NAME (IF DIFFERENT FROM ABOVE) <b>GEOFF MEGGS</b>		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>COUNCILLOR</b>	
MAILING ADDRESS <b>819 SAWCUT</b>		PHONE NO. <b>604-873-3004</b>	
CITY / TOWN <b>VANCOUVER</b>	POSTAL CODE <b>V5Z 4A2</b>	EMAIL (IF AVAILABLE) <b>GEOFF.MEGGS@GMAIL.COM</b>	

JURISDICTION <b>VANCOUVER</b>
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE)
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>VISION VANCOUVER</b>
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>VISION VANCOUVER ELECTOR ASSOCIATION</b>

FINANCIAL AGENT'S LAST NAME <b>KANG</b>	FIRST NAME <b>OPREET</b>	MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS <b>PO BOX 4635 STATION MAIN</b>		PHONE NO. <b>604-568-6913</b>
CITY / TOWN <b>VANCOUVER</b>	POSTAL CODE <b>V6B 4A1</b>	EMAIL (IF AVAILABLE) <b>FINANCIAL.AGENT@VOTEVISION.CA</b>

EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014/05/05</b>	<b>If there were previous financial agents, complete form 4236.</b>
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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"/>

# 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

## LOCAL ELECTIONS CANDIDATE



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SEE AMENDMENT

Amendment # \_\_\_\_\_

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MAILING ADDRESS <b>819 SAWCUT</b>		PHONE NO. <b>604-873-3004</b>	
CITY / TOWN <b>VANCOUVER</b>	POSTAL CODE <b>V5Z 4A2</b>	EMAIL (IF AVAILABLE) <b>GEOFF.MEGGS@GMAIL.COM</b>	
JURISDICTION <b>VANCOUVER</b>			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE)			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>VISION VANCOUVER</b>			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>VISION VANCOUVER ELECTOR ASSOCIATION</b>			
FINANCIAL AGENT'S LAST NAME <b>KANG</b>	FIRST NAME <b>OPREET</b>	MIDDLE NAME	
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CITY / TOWN <b>VANCOUVER</b>	POSTAL CODE <b>V6B 4A1</b>	EMAIL (IF AVAILABLE) <b>FINANCIAL.AGENT@VOTEVISION.</b>	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014/05/05</b>	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

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- |  |  |
|--|--|
| 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"/>                    |
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| 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"/>                  |

**4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS**

**LOCAL ELECTIONS CANDIDATE**

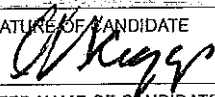


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NAME OF CANDIDATE GEOFF MEGGS
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**Declaration:**

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 	DATE: (YYYY/MM/DD) 2015/01/20
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PRINTED NAME OF CANDIDATE GEOFF MEGGS
--

SIGNATURE OF FINANCIAL AGENT 	DATE: (YYYY/MM/DD) 2015/02/15 <sup>09</sup>
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PRINTED NAME OF FINANCIAL AGENT OPREET KANG
--

**Campaign accounts:**

NAME OF SAVINGS INSTITUTION VANCOUVER CITY SAVINGS BRANCH 8
ADDRESS 501 10TH AVE. WEST, VANCOUVER, BC V5Z 1K9

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

**4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS**

**LOCAL ELECTIONS CANDIDATE**



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SEE AMENDMENT

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PRINTED NAME OF CANDIDATE GEOFF MEGGS
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SIGNATURE OF FINANCIAL AGENT 	DATE: (YYYY/MM/DD) 2015/02/15
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PRINTED NAME OF FINANCIAL AGENT OPREET KANG
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**Campaign accounts:**

NAME OF SAVINGS INSTITUTION VANCOUVER CITY SAVINGS BRANCH 8
ADDRESS 501 10TH AVE. WEST, VANCOUVER, BC V5Z 1K9

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

**4222 - STATEMENT OF INCOME AND EXPENSES**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  
 GEOFF MEGGS

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 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)

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



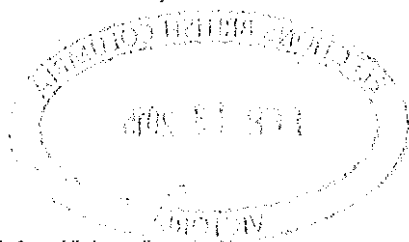
PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE  
GEOFF MEGGS

		All Contributions	
	Individuals	3,000.00	
	Corporations	125.00	
	Unincorporated Business/Commercial Organizations	0.00	
	Trade Unions	750.00	
	Non-profit Organizations	0.00	
	Other Identifiable Contributors	0.00	
	<b>Total</b>	<b>\$ 3,875.00</b>	<b>A</b>
	Anonymous contributions	\$ 0.00	B
	<b>Total contributions (A + B)</b>	<b>\$ 3,875.00</b>	<b>C</b>
	<b>Total significant contributions (must equal box A on all forms 4224)</b>	<b>\$ 3,875.00</b>	
	<b>Total contributions of less than \$100</b>	<b>\$ 0.00</b>	

Number of contributors who gave less than \$100 # 0

Number of anonymous contributors # 0





**4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)**

**LOCAL ELECTIONS CANDIDATE**



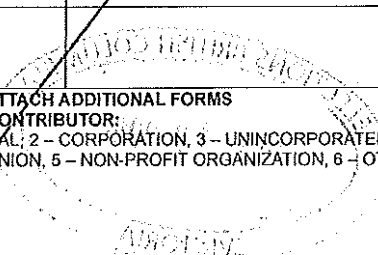
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SEE AMENDMENT

NAME OF CANDIDATE <b>GEOFF MEGGS</b>	PAGE <b>1</b>
	OF <b>1</b>

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
2014/11/05	MICHAEL AUDAIN		1	3,000.00
2014/10/23	KEBET HOLDINGS LTD. RYAN BEEDIE, KEITH BEEDIE	800 -885 WEST GEORGIA STREET VANCOUVER BC V6C 3H1	2	125.00
2014/11/13	UNITED HERE LOCAL 40 ROBERT DEMAND, SHELLEY ERVIN	100-4180 LOUGHEED HWY, BURNABY, BC, V5C 6A7	4	750.00
<b>TOTAL CONTRIBUTIONS</b>				<b>A 3,875.00</b>

IF NEEDED, ATTACH ADDITIONAL FORMS  
 \* CLASS OF CONTRIBUTOR:  
 1 - INDIVIDUAL; 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION  
 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER IDENTIFIABLE CONTRIBUTOR





**4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS**  
**LOCAL ELECTIONS CANDIDATE**

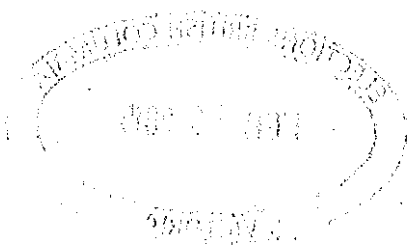


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NAME OF CANDIDATE GEOFF MEGGS	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
<b>INSTRUCTIONS:</b> Complete one sheet for each prohibited campaign contribution received. Attach additional forms if necessary.	

RECEIVED FROM	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION <input type="checkbox"/> ANONYMOUS					
DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED					
<b>Complete this field if the prohibited campaign contribution was received from an individual:</b>					
NAME OF INDIVIDUAL					
<b>Complete these fields if the prohibited campaign contribution was received from an organization:</b>					
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, 6 - OTHER







# 4228 - FUNDRAISING FUNCTION TICKET SALES

## LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <b>GEOFF MEGGS</b>	PAGE <input style="width: 20px;" type="text" value="1"/>
	OF <input style="width: 20px;" type="text" value="1"/>

DATE OF EVENT (YYYY/MM/DD) <b>NA</b>	DESCRIPTION OF FUNDRAISING EVENT <b>NA</b>
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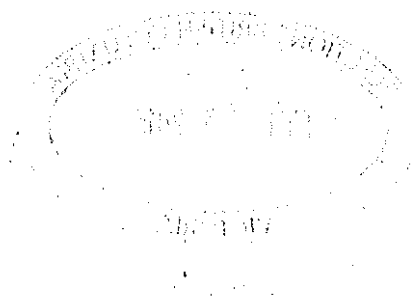
**Income reported as campaign contributions**

	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				<input type="checkbox"/>

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"/>



**4229 - SUMMARY OF ELECTION EXPENSES**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  
 GEOFFREY MEGGS

	Column A Election Expenses	Column B Election Proceedings Period Expenses
<b>ADVERTISING</b>		
Brochures, pamphlets and flyers		
Internet		
Newspaper, magazine, journal		
Radio		
Signs and billboards		
Television		
Other advertising		
<b>CAMPAIGN ADMINISTRATION</b>		
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		
<b>EXCLUSIONS THAT MUST BE REPORTED</b>		
Personal election expenses	\$560.50	
Interest on loans for election expenses		
Legal and accounting services	\$3,000.00	
Financial agent services		
Other expenses (describe)		
<b>Total Expenses</b>	<b>A</b> \$3560.50	<b>B</b>

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 15, 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 15, 2014.









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



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NAME OF CANDIDATE  
GEOFF MEGGS

PAGE   
OF

Transfers between candidate's own campaign accounts in same jurisdiction

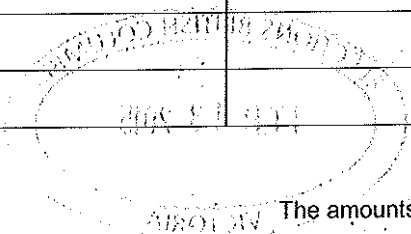
PURPOSE	AMOUNT

Transfers from candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		A <input type="text" value="0.00"/>

Transfers to candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		B <input type="text" value="0.00"/>



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

**4234 - DISBURSEMENT OF SURPLUS FUNDS**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  
 GEOFF MEGGS

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

Total amount of campaign contributions from candidate  **B**

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

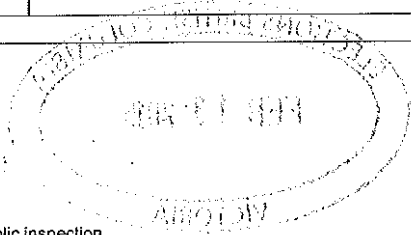
Date of reimbursement to candidate (YYYY/MM/DD)

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).

If the amount in Box D is less than \$500 provide details of how it was disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
2015/01/20	BALANCE PAID TO CANDIDATE	314.50







**4236 - PREVIOUS FINANCIAL AGENTS  
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE GEOFF MEGGS			
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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FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
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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)

