


Amendment # _____

				GENERAL VOTING DAY (YYYY/MM/DD) 2022/10/15	
CANDIDATE'S FULL NAME AMRITPAL SINGH MUND			BALLOT NAME (IF DIFFERENT) AMRITPAL MUND		
CANDIDATE'S MAILING ADDRESS 2087 LONSDALE CREST			PHONE NUMBER 6048533126		
CITY/TOWN ABBOTSFORD	PROV. BC	POSTAL CODE V2T1C3	EMAIL (IF AVAILABLE) amrit604@gmail.com		
JURISDICTION ABBOTSFORD			OFFICE SOUGHT		
ELECTION AREA ABBOTSFORD					
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)					
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)					
<input checked="" type="checkbox"/> Tick if candidate is their own financial agent		<input type="checkbox"/> Tick if candidate was also a third party sponsor			
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)			EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NUMBER		
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)		
ZERO CAMPAIGN ACTIVITY Candidates with zero campaign activity may file this form only. If any of the conditions are not met , file other forms applicable to the campaign.					<input type="checkbox"/> Tick if candidate had zero campaign activity
1. No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc.					
2. No expenses, including signs reused from previous elections, campaign account fees, etc.					
3. Did not have a campaign account.					
4. Did not change financial agents during this election.					
NOTE - ENDORSED CANDIDATES MUST ALSO INCLUDE A COPY OF THEIR CAMPAIGN FINANCING ARRANGEMENT.					
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 <i>Local Elections Campaign Financing Act</i> .					
SIGNATURE OF CANDIDATE 			SIGNATURE OF FINANCIAL AGENT		
DATE (YYYY/MM/DD) 2022/11/27			DATE (YYYY/MM/DD) 2022/11/27		
WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.					

Please submit your report to Elections BC: electoral.finance@elections.bc.ca

All forms included in this report are available for public inspection.
PLEASE KEEP A COPY FOR YOUR RECORDS

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NAME OF CANDIDATE
AMRITPAL MUND

INCOME

Value of campaign contributions from all sources (box A, Form 4302)	15,181.84
Amount of all permissible loans received (box B, Form 4304)	0.00
Other income and transfers received (box A, Form 4305)	0.00
TOTAL INCOME (sum of above boxes)	15,181.84

EXPENSES

Election period expenses (box A, Form 4307)	14,107.65
Campaign period expenses (box B, Form 4307)	
Election period expenses not subject to limits (box D, Form 4307)	
Campaign period expenses not subject to limits (box E, Form 4307)	
Other expenses and transfers given (box A, Form 4309)	
Balance remaining in campaign account(s) after payment of all expenses (box A, Form 4311)	1,074.19
TOTAL EXPENSES (sum of above boxes)	15,181.84

Campaign Account(s)

NAME OF SAVINGS INSTITUTION
CIBC

ADDRESS
32041 South Fraser Way, Abbotsford, BC V2T 1W3

NAME OF SAVINGS INSTITUTION

ADDRESS

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SUMMARY OF CAMPAIGN CONTRIBUTIONS
LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE
AMRITPAL MUND

Campaign contributions include monetary and in-kind contributions.
Campaign contributions from the candidate must be reported in the same way as contributions from other sources.
Do not include anonymous contributions with contributions less than \$100.

Number of contributors who gave less than \$100	#	0	Total contributions of less than \$100	\$	0.00
Number of anonymous contributors	#	0	Anonymous contributions	\$	0.00
Total value of contributions of \$100 or more (box A, Form 4303)			\$	0.00	
TOTAL CONTRIBUTIONS				\$	0.00
					A

NAME OF CANDIDATE
AMRITPAL MUND

PAGE 1

OF 2

Attach additional forms if necessary.

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				DATE RECEIVED (YYYY/MM/DD)	CONTRIBUTION AMOUNT	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	ADDRESS	CITY	PROV.	POSTAL CODE			
AMRITPAL SINGH MUND	[REDACTED]				2022/09/19	1,100.00	1,100.00
INDERJIT MUND					2022/09/19	1,100.00	1,100.00
GURMAIL SIDHU					2022/09/19	1,000.00	1,000.00
HARBANS SIDHU					2022/09/19	1,000.00	1,000.00
MAJIT GHOLIA					2022/09/19	1,000.00	1,000.00
JATINDER GHUMAN					2022/09/20	1,000.00	1,000.00
HARVINDER GHUMAN					2022/09/20	1,000.00	1,000.00
HARDEEP DHALI WAL					2022/09/20	1,000.00	1,000.00
CHARANJIT DHALI WAL					2022/09/20	1,000.00	1,000.00

SUBTOTAL OF THIS PAGE

9,200.00

TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303

A

CAMPAIGN CONTRIBUTIONS WITH A TOTAL VALUE OF \$100 OR MORE
LOCAL ELECTIONS CANDIDATE

4303
(22/03)

NAME OF CANDIDATE
AMRITPAL MUND

PAGE 2
OF 2

Attach additional forms if necessary.

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				DATE RECEIVED (YYYY/MM/DD)	CONTRIBUTION AMOUNT	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	ADDRESS	CITY	PROV.	POSTAL CODE			
SURJIT PABLA					2022/09/22	1,000.00	1,000.00
HARJINDER BOLA					2022/09/22	1,000.00	1,000.00
SWEETA BOLA					2022/09/22	1,000.00	1,000.00
AMRIK SINGH PABLA					2022/09/22	1,000.00	1,000.00
GURDEEP KAUR PABLA					2022/09/22	1,000.00	1,000.00
SUKHPAL BOPARAI					2022/09/22	1,000.00	1,000.00
RAVISH KANWAL					2022/09/22	181.84	181.84

SUBTOTAL OF THIS PAGE 6,181.84

TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303 15,181.84 A

NAME OF CANDIDATE AMRITPAL MUND	PAGE <input style="width: 30px;" type="text"/> OF <input style="width: 30px;" type="text"/>
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Complete one entry for each permissible loan received. Attach additional forms if necessary.
Permissible loans from the candidate must be disclosed in the same way as permissible loans from other sources.

LOAN		
NAME OF LENDER N/A		
RESIDENTIAL ADDRESS OF LENDER (IF INDIVIDUAL)		
LOAN DETAILS		
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD) N/A	\$ ORIGINAL AMOUNT OF LOAN A
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE % N/A	PRIME RATE* %

Report all loan payments on Form 4309.

LOAN		
NAME OF LENDER		
RESIDENTIAL ADDRESS OF LENDER (IF INDIVIDUAL)		
LOAN DETAILS		
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN A
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE %	PRIME RATE* %

Report all loan payments on Form 4309.

N/A

TOTAL AMOUNT OF ALL LOANS RECEIVED (Sum of all boxes A on Form(s) 4304)	<input style="width: 100%;" type="text" value="0.00"/>	B
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RESIDENTIAL ADDRESS:
REQUIRED FOR INDIVIDUAL LENDERS ONLY

***PRIME RATE OF INTEREST:**
REQUIRED FOR LOANS FROM SAVINGS INSTITUTIONS -- AVAILABLE ON ELECTIONS BC WEBSITE

NAME OF CANDIDATE AMRITPAL MUND	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
Report all transfers received and income that are not campaign contributions or loans on this form.	

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
	N/A	
	N/A	
TOTAL		0.00 A

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NAME OF CANDIDATE AMRITPAL MUND	PAGE <input style="width: 20px;" type="text"/>
	OF <input style="width: 20px;" type="text"/>

Complete one entry for each prohibited campaign contribution or loan received. Attach additional forms if necessary.

PROHIBITED CONTRIBUTION				
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				
FULL NAME OF INDIVIDUAL OR ORGANIZATION				
ADDRESS OF ORGANIZATION, IF APPLICABLE				

PROHIBITED LOAN	
DESCRIPTION OF HOW THE PROHIBITED LOAN WAS RECEIVED <div style="text-align: center; font-size: 2em; color: blue; font-family: cursive;">N/A</div>	DATE RETURNED TO LENDER (YYYY/MM/DD)
NAME OF LENDER	
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)
\$ ORIGINAL AMOUNT OF LOAN	
LOAN INTEREST RATE %	PRIME RATE* %

***PRIME RATE OF INTEREST:**
REQUIRED FOR LOANS FROM SAVINGS INSTITUTIONS – AVAILABLE ON ELECTIONS BC WEBSITE

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NAME OF CANDIDATE
AMRITPAL MUND

Election Period Expenses - Report the value of all goods and services used in the election period.
Campaign Period Expenses - Report the value of all goods and services used in the campaign period.
If goods and services were used in both periods, report the full amount used in both columns (e.g., campaign signs).

ADVERTISING	ELECTION PERIOD EXPENSES	CAMPAIGN PERIOD EXPENSES
Commercial canvassing in person, by telephone, or over the internet		
Newspapers and periodicals		519.21
Promotional materials, including newsletters, brochures, buttons and novelty items		
Radio	0.00	1,050.00
Search engine marketing and optimization		
Signs		9,152.64
Value of reused signs		
Social media		210.80
Television		3,150.00
Website displays		25.00
Other expenses (describe)		

CAMPAIGN ADMINISTRATION	ELECTION PERIOD EXPENSES	CAMPAIGN PERIOD EXPENSES
Accounting services		0.00
Bank charges		0.00
Conventions, workshops and meetings		0.00
Donations and gifts		0.00
Fundraising functions		0.00
Furniture and equipment		0.00
Interest expense		0.00
Office rent, utilities, insurance and maintenance		0.00
Office supplies and stationary		0.00
Postage and courier		0.00
Professional services		0.00
Research and data, including election surveys and polls		0.00
Salaries and benefits		0.00
Social functions		0.00
Subscriptions and dues		0.00
Telecommunications and information technology		0.00
Travel		0.00
Other expenses (describe)		

TOTAL EXPENSES	0.00	A	14,107.65	B
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CAMPAIGN PERIOD EXPENSE LIMIT	50000	C
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ELECTION EXPENSES NOT SUBJECT TO LIMITS	ELECTION PERIOD	CAMPAIGN PERIOD		
Personal election expenses		0.00		
Financial agent services		0.00		
Legal and accounting services		0.00		
Interest on loans for election expenses		0.00		
TOTAL EXPENSES NOT SUBJECT TO LIMITS	0.00	D	0.00	E

NAME OF CANDIDATE
AMRITPAL MUND

PAGE
OF

Report the total value of all shared election expenses in the applicable column for each period. Use a separate form for each unique group of candidates that shared election expenses. Attach additional forms if necessary.

	ELECTION PERIOD	CAMPAIGN PERIOD
Total value of shared election expenses	<input type="text"/>	<input type="text"/>
Candidate's portion of shared election expenses	<input type="text"/>	<input type="text"/>
Amount paid to supplier(s) (if applicable)	<input type="text"/>	<input type="text"/>

Note - ensure only your portion of shared election expenses is reported on Form 4307.

Provide the full names of other candidates the election expenses were shared with and the amounts of reimbursements either received from other candidates for their portion or paid to other candidates for your portion.

FULL NAME(S) OF OTHER CANDIDATE(S)	ELECTION PERIOD		CAMPAIGN PERIOD	
	Amount of reimbursement		Amount of reimbursement	
	\$ Paid	\$ Received	\$ Paid	\$ Received
N/A				

NAME OF CANDIDATE AMRITPAL MUND	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
Report all transfers given and expenses that are not election expenses on this form.	

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
	N/A	
TOTAL		0.00 A

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NAME OF CANDIDATE
AMRITPAL MUND

PAGE
OF

Complete a separate form for each function.

DATE OF FUNCTION (YYYY/MM/DD)

DESCRIPTION OF FUNDRAISING FUNCTION (IF JOINT FUNCTION, LIST OTHER CANDIDATE(S))

A – FUNDRAISING INCOME REPORTED AS CAMPAIGN CONTRIBUTIONS

All income reported as campaign contributions must also be included on Form 4302 and, if applicable, Form 4303.

TICKET SALES (includes function entry fees)

NUMBER OF
TICKETS SOLD

CHARGE
PER TICKET

TOTAL
CHARGES
COLLECTED

TICK IF
CHARGE PER
TICKET VARIES

Purchases by eligible individuals
of more than \$50 worth of tickets

#

x

\$

=

\$

Number of eligible individuals that purchased tickets

OTHER CAMPAIGN CONTRIBUTIONS

(i.e., goods and services that are donated for the function or sold at the function for more than their market value)

DESCRIPTION

\$ VALUE

N/A

B – FUNDRAISING INCOME NOT REPORTED AS CAMPAIGN CONTRIBUTIONS

All income not reported as campaign contributions must also be included on Form 4305.

TICKET SALES (includes function entry fees)

NUMBER OF
TICKETS SOLD

CHARGE
PER TICKET

TOTAL
CHARGES
COLLECTED

TICK IF
CHARGE PER
TICKET VARIES

Purchases by eligible individuals
of \$50 or less worth of tickets

#

x

\$

=

\$

Number of eligible individuals that purchased tickets

OTHER INCOME NOT REPORTED AS CAMPAIGN CONTRIBUTIONS

(i.e., goods and services sold at the function for their market value or less)

DESCRIPTION

\$ VALUE

C – COST OF FUNCTION

The total cost of all fundraising functions must also be included on Form 4309.

The cost of a fundraising function includes goods and services such as food, drinks, prizes, decorations, venue rental, advertising, staffing, entertainment, etc.

\$ TOTAL COST OF FUNCTION

NAME OF CANDIDATE
AMRITPAL MUND

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

1,074.19 A

Total amount of campaign contributions from candidate

1,100.00

A If the candidate made campaign contributions of money to their own campaign, they can be paid back for those amounts from the balance remaining in the campaign account(s). Enter the payment to the candidate below and go to B.

DATE (YYYY/MM/DD)	\$ AMOUNT
2022/11/27	1,074.19

B If the amount remaining in the campaign account(s) is \$500 or more after payment of all expenses, and the candidate has been paid back (if applicable), the funds must be paid to the jurisdiction where the candidate ran for election. Enter the payment below. If the amount remaining in the campaign account(s) is less than \$500 skip this section and go to C.

DATE (YYYY/MM/DD)	\$ AMOUNT

C If the amount remaining in the campaign account(s) is less than \$500 after the payment of all expenses, and the candidate has been paid back (if applicable), the funds must be disbursed as directed by the candidate. Enter this disbursement below, including a description of how the funds were disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
		0.00
		0.00
		0.00

NAME OF CANDIDATE AMRITPAL MUND

FORMER FINANCIAL AGENTS				
Enter the information below for any former financial agents during this election. Do not enter financial agent information from previous elections, or the name of the candidate if they previously acted as their own financial agent.				
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)				
FINANCIAL AGENT'S FULL NAME				
FINANCIAL AGENT'S MAILING ADDRESS				PHONE NUMBER
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	
	BC	V1V 1A1		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)				
FINANCIAL AGENT'S FULL NAME				
FINANCIAL AGENT'S MAILING ADDRESS				PHONE NUMBER
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	

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