Amendment #



DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS CANDIDATE

(22/02)

				GENERAL VOTING DAY (YYYY/MM/DD 2022/10/15	
CANDIDATE'S FULL NAME KIMBERLY DAWN JORDISON		BALLOT NAME (IF DIFFERENT) KIM JORDISON			
CANDIDATE'S MAILING ADDRESS 3429 HOPWOOD PLACE			PHONE NUMBER 250-216-3660		
CITY/TOWN /ICTORIA	PROV. BC	POSTAL CODE V9C 0J1	EMAIL (IF AVAILABLE) kimberlyjordison@gmail.com		
JURISDICTION			OFFICE SOUGHT COUNCILLOR		
LECTION AREA	ALL STATE OF THE S				
SALLOT NAME OF ENDORSING ELECTOR (ORGANIZATION (IF APPL	ICABLE)		Control of the Contro	
EGAL NAME OF ENDORSING ELECTOR O	RGANIZATION (IF DIFFEI	RENT)	or wastern management of the		
✓ Tick if candidate is their own final	ncial agent	Пп	ck if candidate was also	o a third party sponsor	
INANCIAL AGENT'S FULL NAME (IF NOT A				PPOINTMENT (YYYY/MM/DD)	
INANCIAL AGENT'S MAILING ADDRESS			PHONE NUMBER		
CITY/TOWN	PROV.	PROV. POSTAL CODE			
ZERO CAMPAIGN ACTIVITY Candidates with zero campaign activity material forms applicable to the campaign. 1. No income or deposits, including function previous elections, transfers, etc. 2. No expenses, including signs reused. 3. Did not have a campaign account. 4. Did not change financial agents during the campaign account.	ds from the candidate, c c. from previous elections	ontributions, dona	ations, gifts, loans, funds	Tick if candidate had zero campaign activity	
DECLARATION: the undersigned, declare that to the best equired under the Local Elections Campai	of my knowledge and be	elief, this disclosu		and accurately discloses the information	
SIGNATURE OF CANDIDATE		X	m tarden		

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



THIS IS AN AMENDED REPORT



CAMPAIGN FINANCING SUMMARY LOCAL ELECTIONS CANDIDATE

4301 (22/04)

ME OF CANDIDATE M JORDISON	
ICOME	
Value of campaign contributions from all sources (box A, Form 4302)	1,979.14
Amount of all permissible loans received (box B, Form 4304)	
Other income and transfers received (box A, Form 4305)	
TOTAL INCOME (sum of above boxes)	1,979.14
EXPENSES	
Election period expenses (box A , Form 4307)	1,916.4
Campaign period expenses (box B , Form 4307)	1,976.1
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)	
TOTAL EXPENSES (sum of above boxes)	3,892.5
NAME OF SAVINGS INSTITUTION CIBC-HILLSIDE ACCOUNT	
ADDRESS 1644 HILLSIDE AVENUE, UNIT 29, VICTORIA, BC V8T 2C5	
NAME OF SAVINGS INSTITUTION	
DRESS 14 HILLSIDE AVENUE, UNIT 29, VICTORIA, BC V8T 2C5	





SUMMARY OF CAMPAIGN CONTRIBUTIONS

4302

LOCAL ELECTIONS CANDIDATE

(22/03)

NAME OF CANDIDATE KIM JORDISON				
Campaign contributions include monetary and in Campaign contributions from the candidate mus Do not include anonymous contributions with co	st be reported in	the same way as contributions from o	ther source	s.
Number of contributors who gave less than \$100	# 4	Total contributions of less than \$100	\$	225.00
Number of anonymous contributors	#	Anonymous contributions	\$	
Total val	ue of contribution	s of \$100 or more (box A , Form 4303)	\$	1,754.14
		TOTAL CONTRIBUTIONS	\$	1,979.14 A



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

4303 (22/03)

LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE	PAGE 1
KIM JORDISON	OF 1
Attach additional forms if necessary.	

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				DATE RECEIVED	CONTRIBUTION	TOTAL OF
	ADDRESS	CITY	PROV.	POSTAL CODE	(YYYY/MM/DD)	AMOUNT	CONTRIBUTIONS
MARGARET ABERCROMBIE-							
UTCHEON					2022/08/02	500.00	500.0
LISSA MERZ					2022/09/04	100.00	100.0
RIAN STEER					2022/09/06	100.00	100.0
RIAN SEMENKO					2022/09/12	200.00	200.0
AUL SKYDT					2022/09/18	200.00	200.0
IM JORDISON					2022/09/19	654.14	654.1
		ti peritug an anti dan melangan di terret di 195 an meneri	1	-			
				S	UBTOTAL OF THIS PAGE	1,754.14	
				TOTAL CON	TRIBUTIONS FORM(S) 4303	1,754.14 A	





NAME OF CANDIDATE KIM JORDISON

SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE

4307 (22/03)

	ELECTION DECICE	CAMPAIGN PERIOD
ADVERTISING	ELECTION PERIOD EXPENSES	EXPENSES
Commercial canvassing in person, by telephone, or over the internet		
Newspapers and periodicals		
Promotional materials, including newsletters, brochures, buttons and novelty items	702.37	702.3
Radio		
Search engine marketing and optimization		
Signs	1,138.14	1,138.1
Value of reused signs		
Social media		
Television		
Website displays	75.93	75.9
Other expenses (describe)		L
CAMPAIGN ADMINISTRATION Accounting services		
Bank charges		12.7
Conventions, workshops and meetings		12.7
Donations and gifts		-
Fundraising functions		
Furniture and equipment		
Interest expense		
Office rent, utilities, insurance and maintenance		
Office supplies and stationary		
Postage and courier		
Professional services		
Research and data, including election surveys and polls		
Salaries and benefits		
Social functions		47.0
Subscriptions and dues		77.0
Telecommunications and information technology		
Travel		
Other expenses (describe)		
TOTAL EXPENSES	1,916.44 A	1,976.14 E
TOTAL EXPENSES	1,910.44 A	1,976.14 E
CAMPAIGN P	PERIOD EXPENSE LIMIT	9,507.90 C
ELECTION EXPENSES NOT SUBJECT TO LIMITS	ELECTION PERIOD	CAMPAIGN PERIOD
Personal election expenses		
Financial agent services		
Legal and accounting services		K-1/W89-WW-1-7-1
Interest on loans for election expenses		V - 404K - 400 - 440K
TOTAL EXPENSES NOT SUBJECT TO LIMITS	0.00 D	0.00



SHARED ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE

4308 (22/02)

NAME OF CANDIDATE KIM JORDISON Report the total value of all shared election expenses	in the applica	ble column for each r	period Use a separa	PAGE 1 OF 1	
each unique group of candidates that shared election Attach additional forms if necessary.		ole Column to Caon p	onou. Osc a separa	te form for	
	ELECTIO	ON PERIOD	CAMPAIGN F	PERIOD	
Total value of shared election expenses			188.00		
Candidate's portion of shared election expenses				47.00	
Amount paid to supplier(s) (if applicable)			The state of the s		
Note-ensure only your portion of shared election exp	enses is repor	ted on Form 4307.			
Provide the full names of other candidates the election either received from other candidates for their portion	on expenses we n or paid to oth	ere shared with and the er candidates for you	he amounts of reimb ur portion.	oursements	
	ELECTIO	ON PERIOD	CAMPAIGN PERIOD		
FULL NAME(S) OF OTHER CANDIDATE(S)		eimbursement	Amount of reimi		
MARY BROOKE	\$ Paid \$ Received		\$ Paid 47.00	\$ Received	
TRUDY SPILLER					
IAN WARD					
				Control of the Contro	
		<u> </u>			