



ELECTIONS BC
A non-partisan Office of the Legislature

FINANCING REPORT LEADERSHIP CONTESTANT

F-LC (98/11)

PLEASE PRINT IN BLOCK LETTERS OR TYPE

Amendment # _____

CONTESTANT'S SURNAME Emery		FIRST NAME Marc		INITIAL(S) S
REGISTERED POLITICAL PARTY British Columbia Marijuana Party				
FINANCIAL AGENT'S SURNAME Ratney		FIRST NAME Michelle		INITIAL(S)
FINANCIAL AGENT'S MAILING ADDRESS 307 West Hastings				
CITY/TOWN Vancouver	POSTAL CODE V6B 1H4	PHONE NUMBER (604) 684 7076	FAX NUMBER (604) 682 1193	
EMAIL ADDRESS ratneydys@bcnet.com				

This financing report includes the following forms:

	FORMS CHECKLIST	CHIEF ELECTORAL OFFICE USE ONLY
Statement of Income and Expenses – Form St-I&E-1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Summary of Political Contributions by Class – Form Sm-C	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Political Contributions of Money/Property/Services over \$250 – Form S-A1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Permitted Anonymous Contributions Accepted at Functions – Form S-A2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Prohibited Contributions – Form S-Ax	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Personal Expenses Paid by Financial Agent – Form Sm-PE1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Personal Expenses Paid by Contestant – Form Sm-PE2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Summary of Fundraising Functions – Form Sm-F	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Fundraising Function – Form S-F	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Loans & Guarantees Received – Form S-Lf	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Loans/Debts Forgiven/Written Off – Form S-L2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

I, the Financial Agent, declare that:
 (a) I am authorized to act on behalf of the above-named contestant;
 (b) This report and appropriate forms have been prepared in accordance with the Election Act; and
 (c) To the best of my knowledge, information and belief, all the information contained in this statement is complete and accurate.

SIGNATURE OF FINANCIAL AGENT 	DATE (YYYY/MM/DD) 2005/04/01
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties [Section 208].



ELECTIONS BC
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LEADERSHIP CONTESTANT STATEMENT OF INCOME & EXPENSES

SI-I&E-L (99/09)

NAME OF FILING ENTITY <i>MARC S. EMERY</i>	POLITICAL PARTY <i>British Columbia Marijuana Party</i>
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Income:	Total political contributions (box E, form 3m-C)	<i>0</i>
	Gross fundraising income not reported as political contributions (box E, form 3m-F)	<i>0</i>
	Interest income	<i>0</i>
Other income (describe)		

Total Income	<i>0</i>	A
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Expenses:	Accounting and audit services	<i>0</i>
	Bad debt expense	<i>0</i>
	Bank charges	<i>0</i>
	Brochures (pamphlets, flyers, etc.)	<i>0</i>
	Contributions to other organizations	<i>0</i>
	Convention, workshop and meeting fees and rentals	<i>0</i>
	Data processing	<i>0</i>
	Furniture and equipment	<i>0</i>
	Gifts	<i>0</i>
	Insurance	<i>0</i>
	Interest expense	<i>0</i>
	Media advertising	<i>0</i>
	Newsletters	<i>0</i>
	Office rental	<i>0</i>
	Office supplies, stationery	<i>0</i>
	Personal expenses of contestant (box G, form 3m-P21)	<i>0</i>
	Postage & courier	<i>0</i>
	Printing	<i>0</i>
	Professional services	<i>0</i>
	Promotional materials (buttons, pins, etc.)	<i>0</i>
Research & polling	<i>0</i>	
Salaries & benefits	<i>0</i>	
Signs (lawn signs, billboards, etc.)	<i>0</i>	
Social functions	<i>0</i>	
Telecommunications	<i>0</i>	
Travel	<i>0</i>	
Utilities & maintenance	<i>0</i>	
Victory/thank-you parties	<i>0</i>	
Total cost of fundraising functions (box B, form 3m-F)	<i>0</i>	
Other expenses (describe)		<i>0</i>

Total Contestant Expenses	<i>0</i>	B
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Surplus (Deficit) (A - B)	<i>0</i>	C
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SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (99/05)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

Morc S. Emery

Total value of contributions from each of the following classes of contributor:

	Contributions greater than \$250		Contributions of \$250 or less	
Individuals		1a		1b
Corporations		2a		2b
Unincorporated Business/Commercial Organizations		3a		3b
Trade Unions		4a		4b
Non-profit Organizations		5a		5b
Other identifiable contributors		6a		6b
Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, 3-A1)		A		B
Classified totals (A + B)				C
Total anonymous contributions (from box A, 5-A2)				D
Total value of all political contributions from all sources (C + D)				E

Total contributions of money		F
Total contributions of goods, services and discounts (includes contributions through loans and debts)		G
<small>(boxes F + G must equal box E)</small>		

Number of contributors who made contributions of less than \$250 in total value		H
Total amount of all income tax receipts issued for political contributions received (Leadership Contestants cannot issue tax receipts)		I



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POLITICAL CONTRIBUTIONS OF MONEY, PROPERTY OR SERVICES WITH A VALUE GREATER THAN \$250

B-A1 (89/08)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
Merc S Emory

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OF 1

FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated organization, include full names of shareholders)	CLASS OF CONTRIBUTOR ² (✓ APPROPRIATE CLASS)						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			
Table content is crossed out with a large diagonal line from top-left to bottom-right.									

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

TOTAL OF INDIVIDUAL CONTRIBUTIONS
A

ORIGINAL — CHIEF ELECTORAL OFFICE
PLEASE KEEP A COPY FOR YOUR RECORDS

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PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2 (99/05)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
Marc S Emery

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 OF 1

DATE OF FUNCTION	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
/			
TOTAL			A

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PROHIBITED CONTRIBUTIONS

S-Ax (99/08)

NAME OF FILING ENTITY

MARC S EMBERY

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DATE RECEIVED	CIRCUMSTANCES	AMOUNT	DATE RETURNED	OR	DATE SUBMITTED TO CHIEF ELECTORAL OFFICE

TOTAL A

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PERSONAL EXPENSES PAID BY FINANCIAL AGENT

Sm-PE1 (99/05)

(Personal expenses of candidate or contestant
which were paid by the financial agent)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

Marc S. Emery

Paid by the Financial Agent

A. Transportation to, from or within electoral district

Air travel

0

Bus, taxi

0

Rental vehicle

0

Private vehicle

0

Other (describe)

0

Total

0

A

B. Cost of lodging, meals & incidental expenses while travelling

Hotel, motel

0

Meals

0

Incidental expenses (describe)

0

Total

0

B

C. Cost of renting a necessary temporary residence

Rent

0

C

D. All other necessary personal expenses related to
campaign or contest

Family care

0

Disability expenses

0

Total

0

D

E. Total personal expenses paid by the financial agent

Total of items A to D

0

E

F. Total personal expenses paid out of pocket
by candidate or contestant

From Sm-PE2, box E

0

F

G. Total personal expenses from Sm-PE1 & Sm-PE2

Total of items E + F

0

G



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PERSONAL EXPENSES PAID BY CANDIDATE / CONTESTANT

Sm-PE2 (89/05)

(This form must be completed by the candidate or contestant
and submitted to the financial agent within 60 days)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

Marc S. Emery

Paid by the Candidate or Contestant

A. Transportation to, from or within electoral district

Air travel

Bus, taxi

Rental vehicle

Private vehicle

Other (describe)

Total

A

B. Cost of lodging, meals & incidental expenses while travelling

Hotel, motel

Meals

Incidental expenses (describe)

Total

B

C. Cost of renting a necessary temporary residence

Rent

C

D. All other necessary personal expenses related to campaign or contest

Family care

Disability expenses

Total

D

E. Total personal expenses paid by candidate or contestant

Total of items A to D

E



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SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Srr-F (88/05)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

MARC S Emery

Number of fundraising functions held

2

Total gross fundraising function income (sum of boxes K on all S-F)

0

A

Total cost of fundraising functions (sum of boxes L on all S-F)

0

B

Total net income (or loss) from fundraising functions (A - B)

0

C

Total amount of gross income reported as political contributions
(sum of boxes F on all S-F)

0

D

Total amount of gross income NOT reported as political contributions
(sum of boxes J on all S-F)

0

E

(boxes D + E must equal box A)

For election financing reports only (see instructions before completing this section)

Total cost of fundraising functions held during the campaign period,
which did not incur net losses

0

F

Total cost of fundraising functions held outside the campaign period

0

G

Total net losses of fundraising functions which incurred
net losses during the campaign period

0

H



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FUNDRAISING FUNCTION

(Submit a separate form for each function held)

S-F (98/06)

If form is for Nomination Contestant, please tick

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OF

NAME OF FILING ENTITY <i>Mona S. Emery</i>	
DATE OF EVENT (YYYYMMDD)	DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY)

Gross income reported as political contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations			A	
Purchases by individuals of more than \$250 worth of tickets			B	
Purchases by individuals of tickets that are more than \$50 each			C	
Other gross income reported as contributions, including anonymous contributions (provide full details)				
				D
				E
Total gross income reported as political contributions (A + B + C + D + E)				F

Gross income not reported as political 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			G	
Other gross income not reported as contributions (provide full details)				
				H
				I
Total gross income not reported as political contributions (G + H + I)				J
Total gross income (box F + J)				K
Total cost of function				L
Net income (loss) (Box K - L)				M



ELECTIONS 2009
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LOANS AND GUARANTEES RECEIVED

S-L1 (99/06)

NAME OF FILING ENTITY
Marc S. Emery

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OF 1

DATE RECEIVED	FULL NAMES OF LENDER AND GUARANTOR	CLASS (1)						CONDITIONS (if applicable)	ORIGINAL AMOUNT OF LOAN / GUARANTEE (2)	AMOUNT OF LOAN OUTSTANDING (3)	INT. RATE (%)	PRIME RATE (%)	AMOUNT OF INTEREST PAYABLE AT PRIME RATE (4)	AMOUNT OF INTEREST BEING CHARGED (5)	BENEFIT CONTRIBUTION (A-B) (6)
		1	2	3	4	5	6								

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

TOTAL	D	E	TOTAL	F
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LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2 (99/06)

NAME OF FILING ENTITY

Marie S. Emery

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OF

DATE RECEIVED	FULL NAME OF LENDER / CREDITOR	CLASS OF CONTRIBUTOR* (/ APPROPRIATE CLASS)						CONDITIONS (if applicable)	AMOUNT OF LOAN / DEBT \$	AMOUNT OF LOAN / DEBT FORGIVEN / WRITTEN OFF \$
		1	2	3	4	5	6			
TOTALS								A	B	

* CLASS OF CONTRIBUTOR:
1-INDIVIDUAL, 2-CORPORATION, 3-UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,
4-TRADE UNION, 5-NON-PROFIT ORGANIZATION, 6-OTHER

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