

# 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

## LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

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

CANDIDATE'S FULL NAME <b>CAROLINE WATERS</b>		GENERAL VOTING DAY (YYYY/MM/DD) <b>2014 11 15</b>
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>Councillor</b>
MAILING ADDRESS <b>479 HIRST AVENUE</b>		PHONE NO. <b>250 248 6790</b>
CITY/TOWN <b>PARKSVILLE</b>	POSTAL CODE <b>V9P 1J2</b>	EMAIL (IF AVAILABLE)
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 <b>WATERS</b>	FIRST NAME <b>CAROLINE</b>	MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS <b>479 HIRST AVENUE</b>		PHONE NO. <b>250 248 6790</b>
CITY/TOWN <b>PARKSVILLE</b>	POSTAL CODE <b>V9P 1J2</b>	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014 - 11 - 01</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

This disclosure statement includes the following forms:

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

**4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS**

**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE <span style="font-size: 1.2em; font-family: cursive;">CAROLINE WATERS</span>
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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* (LECFA).

SIGNATURE OF CANDIDATE <span style="font-size: 1.2em; font-family: cursive;">Caroline Waters</span>	DATE: (YYYY/MM/DD) <span style="font-size: 1.2em; font-family: cursive;">2014/11/16</span>
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PRINTED NAME OF CANDIDATE <span style="font-size: 1.2em; font-family: cursive;">CAROLINE WATERS</span>
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SIGNATURE OF FINANCIAL AGENT <span style="font-size: 1.2em; font-family: cursive;">Caroline Waters</span>	DATE: (YYYY/MM/DD) <span style="font-size: 1.2em; font-family: cursive;">2014-11-1</span>
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PRINTED NAME OF FINANCIAL AGENT <span style="font-size: 1.2em; font-family: cursive;">CAROLINE WATERS</span>
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**Campaign accounts:**

NAME OF SAVINGS INSTITUTION <span style="font-size: 1.2em; font-family: cursive;">COASTAL COMMUNITY CREDIT UNION</span>
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ADDRESS <span style="font-size: 1.2em; font-family: cursive;">140 ALBERNI HWY. PARKSVILLE BC</span>
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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

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

525 44

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)

525 44 A

Election expenses (from box A on form 4229)

525 44

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)

525 44 B

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE  
 CAROLINE WATERS

All Contributions	
Individuals	525.44
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	
Total	\$ 525.44 A

Anonymous contributions \$ B

Total contributions (A + B) \$ 525.44 C

Total significant contributions (must equal box A on all forms 4224) \$

Total contributions of less than \$100 \$ 0

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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NAME OF CANDIDATE  
**CAROLINE WATERS**

PAGE   
OF

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
10/31/14	Caroline Waters	[REDACTED]		525 49

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

<b>TOTAL CONTRIBUTIONS</b>	A	0
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# 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <span style="font-size: 1.5em; font-family: cursive;">CAROLINE WATERS</span>	PAGE <input style="width: 30px;" type="text"/> OF <input style="width: 30px;" type="text"/>
<b>INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received.                  Attach additional forms if necessary.</b>	

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

**4226 - TRANSFERS RECEIVED  
FROM ELECTOR ORGANIZATION**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  PAGE   
OF

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
<b>TOTAL</b>			<b>A</b> <input type="text"/>

\*Also include legal name if different than ballot name.

## 4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE PAGE   
**CAROLINE WATERS** OF

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
<b>TOTAL</b>			<b>A</b>

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



# 4228 - FUNDRAISING FUNCTION TICKET SALES

## LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <b>CAROLINE WATERS</b>		PAGE <input type="text"/>
		OF <input type="text"/>
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT	

**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="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Total income reported as campaign contributions			<input type="text"/>	

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="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

# 4229 - SUMMARY OF ELECTION EXPENSES

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE  
**CAROLINE WATERS**

	Column A Election Expenses	Column B Election Proceedings Period Expenses				
<b>ADVERTISING</b>						
Brochures, pamphlets and flyers	87 34					
Internet						
Newspaper, magazine, journal	437 08					
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						
Interest on loans for election expenses						
Legal and accounting services						
Financial agent services						
Other expenses (describe)						
<b>Total Expenses</b>	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="width: 100px; text-align: center;">525 44</td> </tr> </table>	A	525 44	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">B</td> <td style="width: 100px;"></td> </tr> </table>	B	
A	525 44					
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.

**4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION**  
**LOCAL ELECTIONS CANDIDATE**



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE CAROLINE WATERS PAGE   
 OF

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
<b>TOTAL</b>			<b>A</b>

\*Also include legal name if different than ballot name.

# 4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

CAROLINE WATERS

PAGE

OF

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
<b>TOTAL</b>			<b>A</b>

\* TYPE:  
 B - Bank fees  
 E - Intended election expense that was not used  
 F - Payments made for fundraising purposes  
 N - Nomination deposit  
 O - Other (describe)

# 4232 - SHARED ELECTION EXPENSE

## LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE **CAROLINE WATERS** PAGE   
 OF

DESCRIPTION OF SHARED EXPENSE

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**



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE **CAROLINE WATERS**

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
<b>TOTAL</b>		<b>A</b>

**Transfers to candidate's own campaign accounts in other jurisdictions**

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
<b>TOTAL</b>		<b>B</b>

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

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



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

CAROLINE WATERS -

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

A

Total amount of campaign contributions from candidate

525 44 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)

2014.11.17

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
2014/11/04	photocopies	87.36
2014/10/31	election ad.	437 08

# 4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

CAROLINE WATERS .

Free advertising provided by jurisdiction

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



# 4236 - PREVIOUS FINANCIAL AGENTS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE			
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)
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)