4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE

ELECTIONS A non-partisan Office of the Legislature

Amendment	#	

CANDIDATE'S FULL NAME	GENERAL VOTING DAY (YYYY/MM/DD)
Robert Cilendon Adams	2014/11/15
BALLOT NAME (IF DIFFERENT FROM ABOVE)	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
BoB Adams	Councillor
MAILING ADDRESS	PHONE NO.
1223 Seldy St.	250 352 9526
MAILING ADDRESS 1223 Selly St. CITY/TOWN Nelson BC POSTA VI	L 2U4 badaens @ nelson. Ca
JURISDICTION Nelson	
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 FIRST-NAME	MIDDLE NAME
1 1 1 L	alendon
FINANCIAL AGENT'S MAILING ADDRESS	PHONE NO.
1223 Selby St	250 352 9526
CITY / TOWN	L CODE EMAIL (IF AVAILABLE)
Welson BC VI	- 2N4 badams o nekonica
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
2014/10/61 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	Summary of Election Expenses - Form 4229
Statement of Income and Expenses - Form 4222	Transfers Given to Elector Organization - Form 4230
Summary of Campaign Contributions by Class - Form 4223	Other Permissible Payments - Form 4231
Significant Contributors (\$100 or more) - Form 4224	Shared Election Expense - Form 4232
Prohibited Campaign Contributions - Form 4225 Trans	fers Between Candidate's Own Accounts - Form 4233
Transfers Received from Elector Organization — Form 4226	Disbursement of Surplus Funds - Form 4234
Other Permissible Deposits - Form 4227	Free Advertising from Jurisdiction - Form 4235
Fundraising Function Ticket Sales – Form 4228	Previous Financial Agents – Form 4236
, and another the second secon	<u> </u>

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Colendon Ada		
Town of towash / Tal	arn S	
Declaration:		
the undersigned, declare that to the best of my knowledge and belief, this equired under the Local Elections Campaign Financing Act (LECFA).	disclosure statement complete	ly and accurately discloses the information
SIGNATURE OF CANDIDATE		DATE: (YYYY/MM/DD)
Tess aldam		
PRINTED NAME OF CANDIDATE Robort Glandon	Adams	
IONATURE OF	<u> </u>	
		DATE: (YYYY/MM/DD)
DINTEDAMENT OF THE CHARMEN		
RINTED NAME OF FINANCIAL AGENT ROBOTT Glondon Aa	lams	
impaign accounts:	1 %	
Bank of Mon	streal	
DDRESS 3000	1 1	Be.
298 /3aker St N	elson BC	VILAHA 4H3
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4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Robert alendon Adams	
Total value of campaign contributions from all sources (from box C on form 4223)	3375
Transfers received from elector organization (from box A on form 4226)	-0-
Total other permissible deposits (from box A on form 4227)	0
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	-
Total Income (sum of above boxes)	3375 ²⁰ A
Election expenses (from box A on form 4229)	3219 95
Transfers to elector organization (from box A on form 4230)	O -
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)	155 55
Total Expenditures (sum of above boxes)	3375 B

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Robert Glendon Adams			
	•		
		All Contributions	;
Individuals		185000	2
BG Corporations		1525 00	<u>.</u>
Unincorporated Business/Commercial Organizations			
Trade Unions			
Non-profit Organizations			
Other Identifiable Contributors			
Total	\$	3 375 =	<u>ت</u> A
Anonymous contributions	\$	Ö	В
Total contributions (A + B)	\$	33750	. c
Total significant contributions (must equal box A on all forms 4224)	\$	3000 =	
Total contributions of less than \$100	\$	375 =	
Number of contributors who gave less than \$100	#	8	
Number of anonymous contributors	#	Zero	

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Robert Glendon H	dams		PAGE /
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
2014/10/01	Marbor Holdings Lld	422 Vornon St Nelson BC	2	2000
	Marbor Holdings Lld Degan Michael Martin 2) Dwill Allen Martin			
2014/10/01	Stewart Mclood		/	100 00
M/10/01 H	Barry Autite ha		191-1-	: : :
014/10/01	Santo Rizzuto		1	200 =
14/10/02	Conlin Enterprises	GIG BilorSt Nélson BC	2	2000
(Lonlin Enterprises D Nancy Diamond 2) Con Diamond			
DAL 10 /03	Mike Berg		1	100 =
14/10/03	Hayne Germaine		1	100 =
	Pat Renwick		1	300 "
14/10/09	Ronald Bugusz		1	100-
01/ 10/10	Robert Nudlevich		/	1000
14/10/20	Barry Taylor		1	150 =
014/10/20	Santi Bulice		1	1000
14/10/22	Ronald Neuring		1	100-
		MERCIAL ORGANIZATION CONT	TOTAL RIBUTIONS	A 1750

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Robert Glendon	Adams		PAGE 2 OF 2
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
2014/10/21	Maglio Building Contre	29 Government Road Nelson BC	2	100 =
	(1) Dominic Maglio		:	
014/10/21	Nelson Home Building Centre	101 Mc Donald Drive Nelson BC	2	100 -
	D Randall Habwill (2) Kim Horswill			
014/10/22	Ward Engineering	1-1014 Seventh St Nelson BC	2	250 =
	O Peter Ward e) Tevi Ward			
14/10/22	Poulm Agencies Lit	42-1 BukerSt Nelson BC	2	1000
	1) Maurice Poulin			
0 14/11/05		701 Lakoside Prive Nelson BC	2	5000
. , ,	Prestige Lakeside Resort O Terry Yesaki D'Terry Schneider			
	Tony Maida		1	200 =
	/			
			مد.	ere pro process and a superior superior superior of the superior superior superior superior superior superior
		į		1250
		page	,,,,,,	The state of the s
CLASS OF CONTRIE 1 - INDIVIDUAL, 2 -	ADDITIONAL FORMS SUTOR: CORPORATION: 3 – UNINCORPORATED BUSINESS/COI	MMERCIAL ORGANIZATION CONTRI	TOTAL BUTIONS	A 3000°

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

				/_	
NAME OF CANDIDATE Rober	+ Gleno	ton Ada	r in 5		PAGE OF
NSTRUCTIONS: Complete one si Attach additiona	heet for each prohibi al forms if necessary.		ibution received.		
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
☐ INDIVIDUAL ☐ ORGANIZATION ☐ ANONYMOUS	(YYYY/MM/DD)		(YYYY/MM/DD)		(TTT) MAGOO)
DESCRIPTION OF HOW THE PROHIBITED CO					
NAME OF INDIVIDUAL					
Complete these fields if the proh	ibited campaign con	tribution was receiv		zation:	
NAME OF ORGANIZATION					CLASS*
MAILING ADDRESS					
NAME OF DIRECTOR		NAME OF DIREC	TOR		

4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

CLASSES OF CONTRIBUTORS: 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION



LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE	OF CANDIDATE Robert alendon Adams		
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
			·
···			
		·	
	/-		
Also include legal name if	different than ballot name.	TOTAL	A

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Robert alendon Adams			OF	
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AM	OUNT
(
-				
			-	
			The state of the s	
TYPE: I – Interest	-	TOTAL	A	
 D - Dividends of shares pai S - Surplus funds from prev F - Fundraising income not 	vious electio	n returned by jurisdiction		

O - Other (describe)

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE







ATE OF EVENT (YYYY/MM/DD) DESCRIPTION	ON OF FUNDRAISING EVE	:NT		
ncome reported as campaign contribution	ons		Market Comment of the	
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations		and the state of t		
Purchases by individuals of more than \$250 worth of tickets	and the second			
Purchases by individuals of tickets that are more than \$50 each				
Total	income reported as	campaign contribution	s	
/				
Remember to report all campaign contrib and if applicable, on form 4224 - Significa	ant Contributors (\$ ⁷		paign Contributio	ns by Class,
Other income not reported as campaign of	contributions			Tick if
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Charge per Ticket Varies

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



Rame of CANDIDATE Robert Glendon Adams		0-1 5
	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	5/7.35	
\$ 4_20° Internet	375-00	
Newspaper, magazine, journal	1418.75	
Radio		
2011 Signs reused Signs and billboards	(408.61)	
Television		
Other advertising	50,00	
CAMPAIGN ADMINISTRATION		
Salaries and wages		
Rent, insurance and utilities		
Courier and postage	538.79	
Furniture and equipment	•	
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions		
Research and polling		
Interest		
EXCLUSIONS THAT MUST BE REPORTED		
Millegra - Personal election expenses	274.56	
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
other expenses (describe)		
Total Expenses	A 3219 45	В
Numn A - Report the value of all election expenses for goods and services used in the campaign perion is from January 1, 2014 to November 15, 2014.	od.	

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Robert Glende	an Adams	PAGE
	Robert of tenar	in procums	OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
		/	
	/		
·			
	•		
*Also include legal name if d	ifferent than ballot name.	TOTAL	A

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	Re	bert Glendon Adams	PAGE OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		·	
			·
TYPE:		TOTAL	A
B – Bank fees E – Intended election exp F – Payments made for fu	ense that was not undraising purpose		

N – Nomination deposit
O – Other (describe)

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE







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 reimbursoments received from other candidates *Note: Remember to include your portion of the shared expense as an election expense on form 4229 - Summary Election Expenses. Full names of other candidates with whom the expense was shared: LAST NAME FIRST NAME MIDDLE NAME MIDDLE NAME	NAME OF CANDIDATE	bert	Cilendon	Adams	PAGE OF		
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 Election Expenses. Full names of other candidates with whom the expense was shared:		•					
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 Election Expenses. Full names of other candidates with whom the expense was shared:			Total valu	ue of shared election expense			
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 Election Expenses. Full names of other candidates with whom the expense was shared:			Candidate's portion	n of shared election expense*			
*Note: Remember to include your portion of the shared expense as an election expense on form 4229 - Summary Election Expenses. Full names of other candidates with whom the expense was shared:	Amount paid directly to supplier (if applicable)						
*Note: Remember to include your portion of the shared expense as an election expense on form 4229 - Summary Election Expenses. Full names of other candidates with whom the expense was shared:	Amount of reimbursements given to other candidate(s)						
Election Expenses. Full names of other candidates with whom the expense was shared:	Amount of reimbursements received from other candidates						
Full names of other candidates with whom the expense was shared:	*Note: Remember to include yo	ur portion of t	he shared expense as	an election expense on form	n 4229 - Summary of		
	•	ملة معامدة المانية	a aynadaa waa aharad				
		with whom th	/		DDLE NAME		
	EFFO I WAITE		/				
		-					
		-/ $-$					
		4					

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4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

sters between candidate:	s own campaign accounts in same jurisdiction		
	PURPOSE		AMOUNT
	and the state of t		
sfers from candidate's ov	vn campaign accounts in other jurisdictions		
ATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		тииома
	<u> </u>		
		TOTAL	Α
fers to candidate's own	campaign accounts in other jurisdictions		
ATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
1			
	·		
	·		

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Robert Cilendon Adams	
	Balance remaining in campaign account(s) after payment of all expenses	15355 A
	Total amount of campaign contributions from candidate	- C B
Amount reimbursed to	C C	
	Date of reimbursement to candidate (YYYY/MM/DD)	
	Amount of remaining surplus funds (after any reimbursement under box C)	/55 55 D
If the amount in Bo	ox 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
2014/11/18	Surplus Funds transfered to Bos Horans	4/5555
]		

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



AME OF CANDIDATE	B Robert C	Tendon Adams		
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



NAME OF CANDIDATE Robert	Cilendon	Adam	5
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	18 A	POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYYJMM/DD)	har faran a		ings/
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)		<u>, </u>	
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	<u> </u>		PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)