# 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



Amendment #	
NG DAY (YYYY/MM/	DD)

Pawela fine Craig  SALLOT RAME OF DIFFERENT FROM ABOVE)  PAW CIVAL G  SALLOT RAME OF DIFFERENT FROM ABOVE)  PAW CIVAL G  SALLOT RAME OF DIFFERENT FROM ABOVE)  POSTAL CODE  CONTY TOWN  POSTAL CODE  CONTY TOWN  A IDEMNI , BC  POSTAL CODE  V9Y BMI PAYN CIVAL G  SALLOT RAMINABLE)  FINANCIAL AGENTS LAST NAME  FIRST NAME  CIVAL G  FINANCIAL AGENTS SALLING ADDRESS  PHONE NO.  SALLOT RAMINABLE)  POSTAL CODE  V9Y BMI PHONE NO.  AND  FINANCIAL AGENTS SALLING ADDRESS  PHONE NO.  AND  FINANCIAL AGENTS  AND  FINANCIAL AGENTS  F	CANDIDATE'S FULL NAME			GENERAL VOTING DAY (YYYY/MM/DD)
PARM CIVAL G MAILING ADDRESS MAIL TOWN PORT A   Benni, BC  JURISDICTION A   Benni, BC				2014/11/15
MALLING ADDRESS  (A 2 II Smith Rd.  (B 2 II Smith R				OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
MALLING ADDRESS  (A 2 II Smith Rd.  (B 2 II Smith R	Pan Craia			School Trustee
Distriction   Postal code   V9Y   SMI   Paracraig @ shaw.ca			1-10114	
POSTAL CODE	10211 Smith Rd.			250-724-0683
JURISDICTION  A I Denni - Clay o quot Regional District - School District #70 (Albenni)  ELECTORAL AREALOCAL TRUST AFFARTRUSTEE ELECTORAL AREA (IF APPLICABLE)  Thustee Elector organization (IF APPLICABLE)  **N/A**  ERALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)  **N/A**  **IRANICIAL AGENT'S LAST NAME**  FINANCIAL AGENT'S NATINAME**  FINANCIAL AGENT'S MAILING ADDRESS  **Q All Sanifh Rd'*  CITY/TOWN  **PONT A Ibenni Be**  EFFECTIVE DATE OF APPORTMENT (YYYYMM/DD)  If there were previous financial agents, complete form 4236.  It is if candidate was registered as a third party sponsor  This disclosure statement includes the following forms:  Declarations and Campaign Accounts - Form 4221   Statement of Income and Expenses - Form 4222   Statement of Income and Expenses - Form 4223   Other Permissible Payments - Form 4223   Transfers Received from Elector Organization - Form 4233   Transfers Received from Elector Organization - Form 4235   Transfers Received from Elector Organization - Form 4235   Other Permissible Deposits - Form 4225   Transfers Received from Elector Organization - Form 4235   Transfers Received from Elector Organiz			POSTAL CODE	EMAIL (IF AVAILABLE)
A     Deprim - Clay grace	Port Alberni, BC		V94 8M1	pamcraig@shaw.ca
Trustee Electoral Area #/   BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    FINANCIAL AGENT'S LAST NAME	JURISDICTION			
Trustee Electoral Area #/   BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    FINANCIAL AGENT'S LAST NAME	Alberni-Clayoquot Ro	gional Distr	ict-School C	Vistrict #90 (Albenni)
Trustee Electoral Area #/   BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)   W/A    FINANCIAL AGENT'S LAST NAME	ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE EL	ECTORAL AREA (IF APPLIC	CABLE)	
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)  W/A  FINANCIAL AGENT'S LAST NAME  FIRST NAME  FOR Me/a  FINANCIAL AGENT'S LAST NAME  FINANCIAL AGENT'S LAST NAME  FINANCIAL AGENT'S MAILING ADDRESS  GALI Smith Rd  CITY/TOWN  PON I Alberni, Be  FOSTAL CODE  V9Y SMI  PACILITAL (IF AVAILABLE)  PACILITAL (IF AVAILABLE)  PACILITAL (IF AVAILABLE)  FOR 4236.  It is fi 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  Statement of Income and Expenses - Form 4222  Transfers Given to Electro Organization - Form 4230  Summary of Campaign Contributions by Class - Form 4223  Significant Contributors (\$100 or more) - Form 4224  Prohibited Campaign Contributions - Form 4225  Transfers Between Candidate's Own Accounts - Form 4233  Transfers Received from Elector Organization - Form 4235  Disbursement of Surplus Funds - Form 4235  Free Advertising from Jurisdiction - Form 4235				
FINANCIAL AGENT'S LAST NAME	BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION	TION (IF APPLICABLE)		
FIRST NAME Cray Pamela Ann  FINANCIAL AGENT'S LAST NAME PAMELA PHONE NO. A 50 7 734 - 0683  CITY/TOWN PON M More No. Before No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN POSTAL CODE V99   SM/ Pacture No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PON M More No. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PHONE AND CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 734 - 0683  CITY/TOWN PAMILING NO. A 50 7 14 14 14 14 14 14 14 14 14 14 14 14 14	NIA			
FINANCIAL AGENT'S LAST NAME  Cray Pamela Ann  FINANCIAL AGENT'S MAILING ADDRESS  4211 Smith Rd  CITY/TOWN  FOR N W Iberni BC  EFFECTIVE DATE OF APPOINTMENT (YYYYMM/DD)  If there were previous financial agents, complete form 4236.  It is disclosure statement includes the following forms:  Declarations and Campaign Accounts — Form 4221 Statement of Income and Expenses — Form 4222 Transfers Given to Electron Expenses — Form 4231 Significant Contributions by Class — Form 4222 Transfers Between Candidate's Own Accounts — Form 4232 Form 4223 Transfers Received from Electro Organization — Form 4233 Form 4233 Transfers Received from Electro Organization — Form 4234 Form 4235	LEGAL NAME OF ENDORSING ELECTOR ORGANIZATI	ON (IF APPLICABLE)		
FINANCIAL AGENT'S MAILING ADDRESS  42/1 Smith Rd  CITY/TOWN  POSTAL CODE POSTA	NA			4.44.44.4
FINANCIAL AGENT'S MAILING ADDRESS  ### A 11   Suniff Rd    CITY/TOWN    POSTAL CODE	FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS  (211 Smith Rd)  CITY/TOWN  PONTAL CODE  V94 SM/  FEFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)  If there were previous financial agents, complete form 4236.  Itick if candidate was registered as a third party sponsor  This disclosure statement includes the following forms:  Declarations and Campaign Accounts — Form 4221  Statement of Income and Expenses — Form 4222  Transfers Given to Elector Organization — Form 4230  Significant Contributors (\$100 or more) — Form 4224  Prohibited Campaign Contributions — Form 4225  Transfers Between Candidate's Own Accounts — Form 4231  Transfers Received from Elector Organization — Form 4232   Other Permissible Deposits — Form 4225  Free Advertising from Jurisdiction — Form 4235  Free Advertising from Jurisdiction — Form 4236  Free Advertising from Jurisdiction — Form	Craig	Pamela		Ann
CITY/TOWN  POSTAL CODE V9Y SM/ PA MAILBLE) PARTICIPATION PARTICIPATION STATE OF APPOINTMENT (YYYY/MM/DD)  If there were previous financial agents, complete form 4236.  Tick if candidate was registered as a third party sponsor  This disclosure statement includes the following forms:  Declarations and Campaign Accounts — Form 4221 V Summary of Election Expenses — Form 4229 V Statement of Income and Expenses — Form 4222 V Transfers Given to Elector Organization — Form 4230 V Significant Contributions by Class — Form 4223 V Other Permissible Payments — Form 4231 V Shared Election Expense — Form 4232 V Shared Election Expense — Form 4232 V Transfers Received from Elector Organization — Form 4225 V Transfers Between Candidate's Own Accounts — Form 4233 V Disbursement of Surplus Funds — Form 4234 V Free Advertising from Jurisdiction — Form 4235 V Free Advertising f				1,
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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  Statement of Income and Expenses — Form 4222  Statement of Income and Expenses — Form 4222  Summary of Campaign Contributions by Class — Form 4223  Other Permissible Payments — Form 4231  Significant Contributors (\$100 or more) — Form 4224  Prohibited Campaign Contributions — Form 4225  Transfers Between Candidate's Own Accounts — Form 4233  Transfers Received from Elector Organization — Form 4226  Other Permissible Deposits — Form 4227  Free Advertising from Jurisdiction — Form 4235			POSTAL CODE	EMAIL (IF AVAILABLE)
Tick if candidate was registered as a third party sponsor  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	Port Alberni, Be		V94 8M1	paincraig@skaw.ea
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Prohibited Campaign Contributions - Form 4225  Transfers Between Candidate's Own Accounts - Form 4233  Transfers Received from Elector Organization - Form 4226  Disbursement of Surplus Funds - Form 4234  Free Advertising from Jurisdiction - Form 4235  Free Advertising from Jurisdiction - Form 4235	Summary of Campaign Contributions by Class	s – Form 4223 1	Other	Permissible Payments - Form 4231
Prohibited Campaign Contributions - Form 4225  Transfers Between Candidate's Own Accounts - Form 4233  Transfers Received from Elector Organization - Form 4226  Disbursement of Surplus Funds - Form 4234  Free Advertising from Jurisdiction - Form 4235  Free Advertising from Jurisdiction - Form 4235				_
Transfers Received from Elector Organization – Form 4226 Disbursement of Surplus Funds – Form 4234 Contract Permissible Deposits – Form 4227 Free Advertising from Jurisdiction – Form 4235 Contract Permissible Deposits – Form 4227 Contract Permissible Deposits – Form 4228 Contract P	Significant Contributors (\$100 or more)	) – Form 4224 🔽	Sł	nared Election Expense – Form 4232
Transfers Received from Elector Organization – Form 4226 Disbursement of Surplus Funds – Form 4234 Contract Permissible Deposits – Form 4227 Free Advertising from Jurisdiction – Form 4235 Contract Permissible Deposits – Form 4227 Contract Permissible Deposits – Form 4228 Contract P	Prohibited Campaign Contributions	s Form 4225	Transfers Between Car	ndidate's Own Accounts Form 4233
Other Permissible Deposits – Form 4227 Free Advertising from Jurisdiction – Form 4235	i Tollibiled Gampaigh Gonthodilons	, I OI III 4220 [*]	Hulloicia Dolivecti Cui	idiadio o omi roodino i omi 1200
Other Permissible Deposits – Form 4227 Free Advertising from Jurisdiction – Form 4235		<del></del>		
	Transfers Received from Elector Organization	- Form 4226	Disburse	ement of Surplus Funds - Form 4234
Fundraising Function Ticket Sales - Form 4228 Previous Financial Agents - Form 4236	• *	<del></del>		
Fundraising Function Ticket Sales - Form 4228 Previous Financial Agents - Form 4236	• *	<del></del>		
	Other Permissible Deposits	s – Form 4227	Free Adve	ertising from Jurisdiction - Form 4235

# 4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Pam Craig	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completel required under the Local Elections Campaign Financing Act (LECFA).	ly and accurately discloses the information
SIGNATURE OF CANDIDATE  PRINTED NAME OF CANDIDATE	DATE: (YYYY/MM/DD) 2014 /11/28
PRINTED NAME OF CANDIDATE  Pam Craig	
SIGNATURE OF FINANCIAL AGENT.	DATE: (YYYY/MM/DD) 2014/11/28
PRINTED NAME OF FINANCIAL AGENT Pam Craig	•
Campaign accounts:	
NAME OF SAVINGS INSTITUTION Royal Bank	
address 2925 - 31d Ave, Port Alberni, R	Be V942A6
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	***************************************
ADDRESS	

# 4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Pameraig		
Total value of campaign contributions from all sources (from box C on form 4223)		
Transfers received from elector organization (from box A on form 4226)		<u> </u>
Total other permissible deposits (from box A on form 4227)		i I
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)		ļ
Total Income (sum of above boxes)	0	Α
	01/ -	
Election expenses (from box A on form 4229)	\$5/0.35	
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)	4510.35	В

# 4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Pam Craig		
	All Contributions	ļ
Individuals		
Corporations		
Unincorporated Business/Commercial Organizations		
Trade Unions		
Non-profit Organizations		
Other Identifiable Contributors		
Total	\$ 0	Α
Anonymous contributions	\$	В
Total contributions (A + B)	\$	С
Total significant contributions (must equal box A on all forms 4224)	\$ 0	
Total contributions of less than \$100	\$ 0	
Number of contributors who gave less than \$100	# N/A	
Number of anonymous contributors	# N/A	

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



	am Craig			OF 17
DATE OF NTRIBUTION (YY/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
				10-17-1-1
DED, ATTACH ADDI S OF CONTRIBUTO	TIONAL FORMS		TOTAL	

### 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE

### NA ELECTIONS A non-partisan Office of the Legislature

#### PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE ParaC	raig			PAGE
INSTRUCTIONS: Complete one s Attach additiona	neet for each prohibi Il forms if necessary		tribution received.	
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	DATE REMITTED TO ELECTIONS BC
☐ INDIVIDUAL ☐ ORGANIZATION ☐ ANONYMOUS	(YYYY/MM/DD)		(YYYY/MM/DD)	(YYYY/MM/DD)
DESCRIPTION OF HOW THE PROHIBITED CO	ONTRIBUTION WAS RECEIV	ED		
Complete this field if the prohibit	ad campaign contrib	ution was resolved	d from an individual	
NAME OF INDIVIDUAL	ed campaign contin	Julion was received	u IIOII ali Illuividua	•
Complete these fields if the proh	ibited campaign con	tribution was rece	ived from an organi	zation:
NAME OF ORGANIZATION		A PARTITION TO	<u>.                                      </u>	CLASS*
MAILING ADDRESS				
NAME OF DIRECTOR		NAME OF DIRE	CTOR	
			· · · · · · · · · · · · · · · · · · ·	

\* CLASSES OF CONTRIBUTORS:

1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,

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

P.C. Does not apply.

# 4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



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

# 4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT





### LOCAL ELECTIONS CANDIDATE

	Р	LEASE PRINT IN BLOCK LETTERS		
NAME OF CANDIDATE	F	Pam Craig		PAGE 8
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION		AMOUNT
		·		1.444.04.44.44.4
TYPE:		TOTAL	Α	0
D - Dividends of shares	paid by credit	union		

O - Other (describe)

S – Surplus funds from previous election returned by jurisdiction F – Fundraising income not reported as a campaign contribution

### 4228 - FUNDRAISING FUNCTION TICKET SALES

### LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD

<b>&amp;</b> &	<b>ELECTIONS</b> A non-partisan Office of the Leg	13,60
	A non-partisan Office of the Leg	gislature .

ATE OF EVENT (YYYY/MM/DD) DESCRIPTIO	N OF FUNDRAISING EVE	NT		
Income reported as campaign contributio	ns			Tick if
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Charge per Ticket Varies
Purchases by organizations				
Purchases by individuals of more than \$250 worth of tickets				
Purchases by individuals of tickets that are more than \$50 each				
Total	ncome reported as	campaign contributior	าร	
Remember to report all campaign contrib	utions on form 422 int Contributors (\$	23 - Summary of Can 100 or more).	npaign Contributio	ns by Class,
and if applicable, on form 4224 - Significa		Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies

P.C. Does not apply.

### **4229 - SUMMARY OF ELECTION EXPENSES** LOCAL ELECTIONS CANDIDATE

_(0		÷			اللبيه	35, 63	20,000	
	A non-partis	an (	Office o	f th	e Leg	islat	ure	
•	·				/1	9	of.	17

	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers		
Internet		
Newspaper, magazine, journal	\$ 510.35	
Radio		
Signs and billboards		
Television		
Other advertising		
CAMPAIGN ADMINISTRATION		
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		
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe)		
and dispenses (december)		
1		
Total Expenses	A \$510.35	В
Total Expenses   A	A \$510.35	
blumn 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.	i.	

# 4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Pameraig		PAGE <b>/6</b> OF /7
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
		•	
		***************************************	
	•		
	·		
Also include legal name if d	lifferent than ballot name.	TOTAL	A —

### 4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	(I)	0 (		PAGE 12 OF 17
	Pan	n Craig		OF 17
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AM	OUNT
111311-013				
			-	
*TYPE:  B – Bank fees  E – Intended election expe	ense that wa	TOTAL s not used	Α	0

N – Nomination deposit O – Other (describe)

### **4232 - SHARED ELECTION EXPENSE**

### LOCAL ELECTIONS CANDIDATE







NAME OF CANDIDATE Pame	neig		PAGE 13_ OF 17		
DESCRIPTION OF SHARED EXPENSE	Does not apply. P.l				
	Total value of shared election expense				
	Candidate's portion of sh	ared election expense*			
	Amount paid directly t	o supplier (if applicable)	0		
	Amount of reimbursements giv	en to other candidate(s)	-0		
	Amount of reimbursements receive	d from other candidates	<b>-</b>		
Election Expenses. Full names of other candidate	es with whom the expense was shared:				
LAST NAME	FIRST NAME	MIDDLE N	AME		
		.1			

# 4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

ME OF CANDIDATE Pama	Praig			PAGE /
•	's own campaign accounts in same jurisdiction			
	PURPOSE			AMOUNT
-				
				***************************************
nsfers from candidate's o	wn campaign accounts in other jurisdictions			
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)			TNUOMA
				*****
		TOTAL	Α	
nsfers to candidate's own	campaign accounts in other jurisdictions			
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)			AMOUNT
1				
			1	
			1 .	

# 4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Pam Craig		
	1		<del>   </del>
	Balance remaining in campaign account(s) after payment of all expenses	-0-	Α
	Total amount of campaign contributions from candidate	\$ 5/0.35	В
Amount reimbursed to car	ndidate from campaign account for the candidate's contributions to their campaign	-0-	С
	Date of reimbursement to candidate (YYYY/MM/DD)		
	Amount of remaining surplus funds (after any reimbursement under box C)	-0	D
If the amount in Box E	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	АМОИТ	
		141	
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# 4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

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NAME OF CANDIDATE	PamCraig				
Free advertising provide	Free advertising provided by jurisdiction Does not apply. P.C.				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)			
,					

# 4236 - PREVIOUS FINANCIAL AGENTS None 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 C	CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	;			
FINANCIAL AGENT'S LAST NAME	FIRST NAME		/	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS		$\overline{/}$		PHONE NO.
CITY/TOWN		POSTAL C	CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)				
FINANCIAL AGENT'S LAST NAME	FIRST NAME			MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS	1.	· · · · · · · · · · · · · · · · · · ·		PHONE NO.
CITY/TOWN		POSTAL C	ODE	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 C	ODE 	EMAIL (IF AVAILABLE)
		<u> </u>	l	