### 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT **LOCAL ELECTIONS CANDIDATE**



PLEASE PRINT IN BLOCK LETTERS		Amendment #
CANDIDATE'S FULL NAME		GENERAL VOTING DAY (YYYY/MM/DD)
	NEGANL	2014/
MICHAEL KNEELAND DO BALLOT NAME (IF DIFFERENT FROM ABOVE)	100011	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
MICHAEL DONEGANI		Councillor
MAILING ADDRESS		PHONE NO.  (250) 248-9515  EMAIL (IF AVAILABLE)
745 GAET JEN STREET		(250)248-9515
CITY/TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)
PARKSUILLE	N9P 1B3	
JURISDICTION .		
CITY OF PARKSUILLE		
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLIC	CABLE)	
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)		
DIELOT MINIE OF EMPONENTO ELECTION ON ON THE MINING (II 7 M 1 ELONGEL)		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)		
		,
FINANCIAL AGENT'S LAST NAME FIRST NAME		MIDDLE NAME
DONEGAN; MICHAEL	KN	EEL AND
FINANCIAL AGENT'S MAILING ADDRESS		РӇОЍЕ Ѝ҇Ѻ.
·		(250) 248 9515
CITY / TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)
PARKSUILLE B. C	190 1B3	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	were previous financia	al agents, complete form 4236.
2014/09/30		
Tick if candidate was registered as a third party sponsor	Tick if candidate a	cted as a campaign organizer
This disclosure statement includes the following forms:		
Declarations and Campaign Accounts – Form 4221	Summar	y 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	Sh	ared Election Expense - Form 4232
Prohibited Campaign Contributions - Form 4225	Transfers Between Can	didate's Own Accounts - Form 4233
Transfers Received from Elector Organization - Form 4226	Disburse	ment of Surplus Funds - Form 4234
Other Permissible Deposits - Form 4227		rtising from Jurisdiction — Form 4235
Fundraising Function Ticket Sales — Form 4228		vious Financial Agents – Form 4236

### 4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF GAMBIDATE		
NAME OF CANDIDATE  MICHAEL	DONEGANI	
Declaration:		
I, the undersigned, declare that to the be required under the Local Elections Camp	est of my knowledge and belief, this disclosure statement comp paign Financing Act (LECFA).	pletely and accurately discloses the information
SIGNATURE OF CANDIDATE	7	DATE: (YYYY/MM/DD)
	O mejani	2014/10/08
PRINTED NAME OF CANDIDATE		
MICHAEL	DON EGAN!	
SIGNATURE OF FINANCIAL AGENT	21)	DATE: (YYYY/MM/DD)
/.	nojini	2014/10/08
PRINTED NAME OF FINANCIAL AGENT		
MICHIEL	DONEGAN:	
Campaign accounts:		
NAME OF SAVINGS INSTITUTION		
CIBC		
ADDRESS		
130 MORISON	ANG. P.O. BOX 370, PARKSVIL	LE BC. V9P-265
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 MICHAEL DONEGANI		
Total value of campaign contributions from all sources (from box C on form 4223)	10,000.00	
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)	10,000.	Α.
		_
Election expenses (from box A on form 4229)	6,047.16	
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)	3,952.84	
Total Expenditures (sum of above boxes)	10,000.00.	В

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



NAME OF CANDIDATE MICHAEL DONESANI		
•	All Contribution	ıs
Individuals	10,000.	ps42
Corporations		
Unincorporated Business/Commercial Organizations		
Trade Unions		
Non-profit Organizations		
Other Identifiable Contributors		
Total	\$ 10,000.	A
Anonymous contributions	\$	В
Total contributions (A + B)	\$ 10,600.	С
Total significant contributions (must equal box A on all forms 4224)	\$ 10,000.	
Total contributions of less than \$100	\$ -0-	
Number of contributors who gave less than \$100	# . &	
Number of anonymous contributors	# 👄	

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



NAME OF CANDIDATE	MICHAEL DONES	4N1		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
20/4/10/07	MICHAEL DONEGANI		1	12,2,000
2014/11/06	MICHMEL DONEGANI			8,000
· · · · · · · · · · · · · · · · · · ·				
		·		
				·
**************************************				
		·		<u> </u>
F NEEDED, ATTACH				<del></del>
CLASS OF CONTRIB 1 - INDIVIDUAL, 2 - 0		OMMERCIAL ORGANIZATION CONTI	TOTAL RIBUTIONS	A 10,000.

### 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE  MICHAEL	DONE	GANI			PAGE (
INSTRUCTIONS: Complete one s Attach additions	heet for each prohib al forms if necessary		tribution received.		
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	OR	DATE REMITTED TO ELECTIONS BC
☐ INDIVIDUAL ☐ ORGANIZATION ☐ ANONYMOUS	(YYYY/MM/DD) N/A	N/A	(YYYY/MM/DD)		W/A
Complete this field if the prohibit	ed campaign contri	bution was receive	d from an individua	:	
Complete these fields if the proh			had from an organi	anton:	
NAME OF ORGANIZATION	inited campaign cor	Itipution was rece	ived from all organi		LASS*
MAILING ADDRESS		1.014.00			
NAME OF DIRECTOR		NAME OF DIRE	CTOR		

<sup>\*</sup> CLASSES OF CONTRIBUTORS:

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

<sup>4 -</sup> TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

# 4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	IICHAEL DONEG	AN,	PAGE ) OF /
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
	NIA		
		·	
*Also include legal name if	different than ballot name.	TOTAL	А

# 4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



#### **LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE MICHAEL DONEGANI			
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		NIA	
		•	
		•	
*TYPE:			
I – Interest D – Dividends of shares pa S – Surplus funds from pret F – Fundraising income not O – Other (describe)	id by credit vious election t reported a	union on returned by jurisdiction s a campaign contribution	<b>A</b>

### **4228 - FUNDRAISING FUNCTION TICKET SALES**

#### LOCAL ELECTIONS CANDIDATE







DATE OF EVENT (YYYY/MM/DD) DESCRIPTI	ON OF FUNDRAISING EVE	NT V/A		
Income reported as campaign contributi	ons			
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if 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	income reported as	campaign contribution	ns	
Remember to report all campaign contrik and if applicable, on form 4224 - Significa Other income not reported as campaign	ant Contributors (\$ <sup>7</sup>		npaign Contribution  Total Charges Collected	Tick if Charge per Ticket Varies

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



			Column A		Column B
ADVERTISING			Election Expenses	Elec	ction Proceedings eriod Expenses
Bro	ochures, pamphlets and flyers		5/2.40		512.40
	Internet				
	Newspaper, magazine, journal	a	963.49	a	963.49
	Radio				
	Signs and billboards	٦	568.17	ć	1568.17
	Television				
	Other advertising				
AMPAIGN ADMINISTRATION	•				
•	Salaries and wages				
	Rent, insurance and utilities				
	Courier and postage				<del>,</del>
· ·	Furniture and equipment				
·	Office supplies			J	
	Professional services				•
Other camp	aign administration expenses				
·	Conventions and meetings				
. Oth	er campaign related functions				
	Research and polling				
	Interest		3.10		3./0
XCLUSIONS THAT MUST BE REPORTED					
	Personal election expenses				
Interest o	n loans for election expenses				
t	egal and accounting services				
	Financial agent services				
other expenses (describe)		•			
		l		L	-
	1			ГТ	
•	Total Expenses	Α	6047.16	В	6047.16

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



NAME OF CANDIDATE		.`		PAGE
MIC	CHAEL DONEGA	$\mathcal{N}_1$		OF /
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VAI TRA	LUE OF ANSFER
	NIA			
1.00				
		1.414.0		
Also include legal name if	different than ballot name.	TOTAL	Α	

# 4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT



### LOCAL ELECTIONS CANDIDATE PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	1CH)	TEL DONEGANI		PAGE 1
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	Af	MOUNT
		H/A		
		•		
		· · · · · · · · · · · · · · · · · · ·		
		,		
· ·				
TYPE: B Bank fees		TOTAL	A	
<ul> <li>E - Intended election expe</li> <li>F - Payments made for fur</li> <li>N - Nomination deposit</li> <li>O - Other (describe)</li> </ul>	ense that wa ndraising pu	s not used tooses	<u> </u>	

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

### LOCAL ELECTIONS CANDIDATE



#### PLEASE PRINT IN BLOCK LETTERS

SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE  MICHAEL	DONEGANÎ		PAGE 1
DESCRIPTION OF SHARED EXPENSE	/A		
	Total value of shared	d election expense	
	Candidate's portion of shared	election expense*	
	Amount paid directly to sup	oplier (if applicable)	
	Amount of reimbursements given to	other candidate(s)	
	Amount of reimbursements received from	m other candidates	<del>.</del>
*Note: Remember to include your port	tion of the shared expense as an election	n expense on form 4229 - S	ummary of
Election Expenses.			
Full names of other candidates with w			
LAST NAME	FIRST NAME	MIDDLE NAME	
·			

# 4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

E OF CANDIDATE			PAGE
FIICHAE	L DONEGANI		OF
sfers between candida	ate's own campaign accounts in same jurisdiction		
	PURPOSE		TANOMA
	NIA		
sfers from candidate's	own campaign accounts in other jurisdictions	•	
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	·	AMOUNT
	N /14		
		TOTAL	A
sfers to candidate's ov	vn campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
	2/4		
			В

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



NAME OF CANDIDATE MIC	HAEL DONE GANI			
		,		
	Balance remaining in campaign account(s) after payment of all expenses	3,952.84	Α	
	Total amount of campaign contributions from candidate	10,000.00	В	
Amount reimbursed to cand	didate from campaign account for the candidate's contributions to their campaign	3,952.84	С	
	Date of reimbursement to candidate (YYYY/MM/DD)	NOV 26/2014		
·	Amount of remaining surplus funds (after any reimbursement under box C)	·	D	
If the amount in Box 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	s less than \$500 provide details of how it was disbursed.			
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT		
			_	
		·		
		•		

### 4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	CHAG DONE			
MICHAEL DONEGANI  Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
	N/A			
		·		
		·		

### 4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE			
MICHAEL	DONE G.	ANI	
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	<b>)</b>		
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)