

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME NORMA ELIZABETH BLISSETT		GENERAL VOTING DAY (YYYY/MM/DD) NOV 15 2014
BALLOT NAME (IF DIFFERENT FROM ABOVE) NORMA BLISSETT		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR
MAILING ADDRESS 821 SUMMIT DRIVE		PHONE NO. 250-489-3408
CITY / TOWN CRANBROOK	POSTAL CODE VIC 5J4	EMAIL (IF AVAILABLE) blissett@shaw.ca
JURISDICTION CITY OF CRANBROOK		
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 HUMPHREY	FIRST NAME DAVID	MIDDLE NAME GEORGE
FINANCIAL AGENT'S MAILING ADDRESS 809-15th ST S		PHONE NO.
CITY / TOWN CRANBROOK	POSTAL CODE VIC 5N9	EMAIL (IF AVAILABLE) dhumph@telus.net
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2014/10/09	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 checked="" type="checkbox"/> | Summary of Election Expenses – Form 4229 <input checked="" type="checkbox"/> |
| Statement of Income and Expenses – Form 4222 <input checked="" type="checkbox"/> | Transfers Given to Elector Organization – Form 4230 <input checked="" type="checkbox"/> |
| Summary of Campaign Contributions by Class – Form 4223 <input checked="" type="checkbox"/> | Other Permissible Payments – Form 4231 <input checked="" type="checkbox"/> |
| Significant Contributors (\$100 or more) – Form 4224 <input checked="" type="checkbox"/> | Shared Election Expense – Form 4232 <input checked="" type="checkbox"/> |
| Prohibited Campaign Contributions – Form 4225 <input checked="" type="checkbox"/> | Transfers Between Candidate's Own Accounts – Form 4233 <input checked="" type="checkbox"/> |
| Transfers Received from Elector Organization – Form 4226 <input checked="" type="checkbox"/> | Disbursement of Surplus Funds – Form 4234 <input checked="" type="checkbox"/> |
| Other Permissible Deposits – Form 4227 <input checked="" type="checkbox"/> | Free Advertising from Jurisdiction – Form 4235 <input checked="" type="checkbox"/> |
| Fundraising Function Ticket Sales – Form 4228 <input checked="" type="checkbox"/> | Previous Financial Agents – Form 4236 <input checked="" type="checkbox"/> |

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE	NORMA BLISSETT
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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 (LECF)*.

SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD)
<i>[Handwritten Signature]</i>	2015/01/17
PRINTED NAME OF CANDIDATE	
NORMA ELIZABETH BLISSETT	

SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
<i>[Handwritten Signature]</i>	2015/01/08
PRINTED NAME OF FINANCIAL AGENT	
DAVID GEORGE HUMPHREY	

Campaign accounts:

NAME OF SAVINGS INSTITUTION	EAST KOOTENAY COMMUNITY CREDIT UNION
ADDRESS	920 BAKER STREET, CRANBROOK, B.C., VIC 1A5

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

NORMA BLISSETT

Total value of campaign contributions from all sources (from box C on form 4223) 4255.00

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) 0

Total Income (sum of above boxes) 4255.00 A

Election expenses (from box A on form 4229) 3190.68

Transfers to elector organization (from box A on form 4230) 0

Total other permissible payments (from box A on form 4231) 23.95

Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233) 0

Amount of surplus funds disbursed (from box A on form 4234) 1040.37

Total Expenditures (sum of above boxes) 4255.00 B

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

NORMA BLISSETT

All Contributions

Individuals	2655.00	
Corporations	∅	
Unincorporated Business/Commercial Organizations	∅	
Trade Unions	1600.00	
Non-profit Organizations	∅	
Other Identifiable Contributors	∅	
Total	\$ 4255.00	A

Anonymous contributions \$ ∅ B

Total contributions (A + B) \$ 4255.00 C

Total significant contributions (must equal box A on all forms 4224) \$ 4055.00

Total contributions of less than \$100 \$ 200.00

Number of contributors who gave less than \$100 # 3

Number of anonymous contributors # ∅

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE NORMA BLISSETT	PAGE 1
	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
2014/10/09	DAVID HUMPHREY		1	105.00
2014/10/09	JENNIFER HUMPHREY		1	100.00
2014/10/09	WILLIAM HILLS		1	200.00
2014/10/09	JEAN SAMIS		1	200.00
2014/10/09	DAM CATSIRELIS		1	100.00
2014/10/15	TERRY SEGARTY		1	100.00
2014/10/15	TERRY SEGARTY		1	100.00
2014/10/16	NORMA BLISSETT		1	500.00
2014/10/22	CUPE (CRANBROOK) MIKE CAPUANO CHRIS ELLIS	# 116 7th AVE S CRANBROOK, BC	4	250.00
2014/10/22	NORMA BLISSETT		1	250.00
2014/10/23	NORMA BLISSETT		1	500.00
2014/10/29	NORMAN CHASTAIN		1	200.00
2014/10/31	RUTH ELLINGSON		1	100.00
2014/11/01	E.K. DISTRICT LABOUR COUNCIL JACKIE SPAIN MATT ROSE	105 9th AVE S CRANBROOK, BC, VIC 2M1	4	350.00
2014/11/05	CUPE BC MARK HANDCOCK SUSAN BLAIR	# 510-4940 CANADA WAY BURNABY V5G 4T3	4	500.00

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

TOTAL CONTRIBUTIONS

A	
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4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: NORMA BLISSETT

PAGE 2 OF 2

Table with 5 columns: DATE OF CONTRIBUTION (YYYY/MM/DD), FULL NAME OF CONTRIBUTOR, ADDRESS OF CONTRIBUTOR, CLASS, VALUE OF CONTRIBUTION. Row 1: 2014/11/12, UFCW IVAN LIMPRIHT FRANK POZZOBON, 350 COLUMBIA ST NEW WESTMINSTER V3L 1A6, 4, 500.00

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

TOTAL CONTRIBUTIONS A 4055.00

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 1.2em; font-family: cursive;">NORMA BLISSETT</div>	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received. Attach additional forms if necessary.	

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					
Complete this field if the prohibited campaign contribution was received from an individual:					
NAME OF INDIVIDUAL					
Complete these fields if the prohibited campaign contribution was received from an organization:					
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

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <div style="font-size: 1.2em; font-family: cursive;">NORMA BLISSETT</div>	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
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DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT
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Income reported as campaign contributions

	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 contributions				

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				

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
NORMA BLISSETT

	Column A Election Expenses	Column B Election Proceedings Period Expenses				
ADVERTISING						
Brochures, pamphlets and flyers	753.75					
Internet						
Newspaper, magazine, journal	297.68					
Radio	142.01					
Signs and billboards	613.21					
Television						
Other advertising						
CAMPAIGN ADMINISTRATION						
Salaries and wages						
Rent, insurance and utilities						
Courier and postage	1,099.56					
Furniture and equipment						
Office supplies						
Professional services						
Other campaign administration expenses						
Conventions and meetings						
Other campaign related functions	284.48					
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)						
Total Expenses	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">A</td> <td style="text-align: center; font-size: 1.2em;">3190.68</td> </tr> </table>	A	3190.68	<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	3190.68					
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.

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE NORMA BLISSETT	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
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DESCRIPTION OF SHARED EXPENSE

Total value of shared election expense	<input style="width: 90%; height: 20px;" type="text" value="0"/>
Candidate's portion of shared election expense*	<input style="width: 90%; height: 20px;" type="text"/>
Amount paid directly to supplier (if applicable)	<input style="width: 90%; height: 20px;" type="text"/>
Amount of reimbursements given to other candidate(s)	<input style="width: 90%; height: 20px;" type="text"/>
Amount of reimbursements received from other candidates	<input style="width: 90%; height: 20px;" type="text"/>

*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



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NAME OF CANDIDATE
NORMA BLISSETT

PAGE **1**
OF **1**

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
TOTAL		A \emptyset

Transfers to candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		B \emptyset

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

4234 - DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 1.5em; font-family: cursive;">NORMA BLISSETT</div>
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Balance remaining in campaign account(s) after payment of all expenses	1040.37	A
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Total amount of campaign contributions from candidate	1250.00	B
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Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign	1040.37	C
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Date of reimbursement to candidate (YYYY/MM/DD)	2014/12/02
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Amount of remaining surplus funds (after any reimbursement under box C)	∅	D
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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).

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If the amount in Box D is less than \$500 provide details of how it was disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT

4235 - FREE ADVERTISING FROM JURISDICTION

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE NORMA BLISSETT
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Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
2014/NOV	CITY OF CRANBROOK	CITY'S WEBSITE FOR ALL CANDIDATES
2014/NOV	CITY OF CRANBROOK	NEWSPAPER ARTICLES FOR ALL CANDIDATES
2014/NOV	CITY OF CRANBROOK	E-KNOW WEBSITE ARTICLES FOR ALL CANDIDATES

4236 - PREVIOUS FINANCIAL AGENTS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE NORMA BLISSETT			
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)