4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS			Amendment #
CANDIDATE'S FULL NAME BARRY FRANKLIN CUNNING BALLOT NAME (IF DIFFERENT FROM ABOVE) TO ARRY CUNNING HAM MAILING ADDRESS 337-814 ASK. IEASK	9/4/Am		GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15 OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR. PHONE NO. 250-624-5100
CITY TOWN PRINCE RUPERT	POSTAL COI	DE 3-M7	EMAIL (IF AVAILABLE)
JURISDICTION C/TY OF PRINCE RUPER ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLI BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	(CABLE)		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
FINANCIAL AGENT'S LAST NAME SMITH FINANCIAL AGENT'S MAILING ADDRESS SJI - SMITH AVE EAST CITY / TOWN PRINCE RUPERF EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			MIDDLE NAME JAMES. PHONE NO. 250-624-4098 EMAIL (IF AVAILABLE) Smith (C) Cityte/net
Tick if candidate was registered as a third party sponsor			al agents, complete form 4236.
This disclosure statement includes the following forms: Declarations and Campaign Accounts - Form 4221 Statement of Income and Expenses - Form 4222			ry of Election Expenses – Form 4229 to Elector Organization – Form 4230
Summary of Campaign Contributions by Class — Form 4223 Significant Contributors (\$100 or more) — Form 4224		SI	r Permissible Payments - Form 4231 hared Election Expense - Form 4232
Prohibited Campaign Contributions — Form 4225 Transfers Received from Elector Organization — Form 4226	Transfers I	Disburse	ement of Surplus Funds – Form 4234
Other Permissible Deposits — Form 4227			ertising from Jurisdiction - Form 4235 evious Financial Agents - Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE BARRY F. CUNNINGIAM.	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure s	tatement completely and accurately discloses the information
required under the Local Elections Campaign Financing Act (LECFA).	
SIGNATURE OF CANDIDATE ,	DATE: (YYYY/MM/DD)
	2015/01/26
PRINTED NAME OF CANDIDATE	
BARRY CUNNINGHAM.	
CONTURE OF AMARONA ACCUT	DATE: (YYYY/MM/DD)
SIGNATURE OF FINANCIAL AGENT	2015/01/26
PRINTED NAME OF FINANCIAL AGENT	70/0/0//10
DAVID SMITH	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION	
CRNADIAN SMPEPIAL BANK OF	COMMERCE.
CANADIAN SMPERIAL BANK OF ADDRESS 500-300 AVE W. PRINCE PUPIER	CT V85-148
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESO	
ADDRESS	·
NAME OF SAVINGS INSTITUTION	
ADDRESS	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF GANDIDATE IS ARRY F. CUNING 17AM.	
Total value of campaign contributions from all sources (from box C on form 4223)	3750.00
Transfers received from elector organization (from box A on form 4226)	-8
Total other permissible deposits (from box A on form 4227)	Ð
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	O
Total Income (sum of above boxes)	3750.00 A
Election expenses (from box A on form 4229)	5328. 30
Transfers to elector organization (from box A on form 4230)	.8
Total other permissible payments (from box A on form 4231)	372.30
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)	149,40
Total Expenditures (sum of above boxes)	5850,00 B
Total Experiences (sum of above soxes)	

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE BARRY E CUNDINC-ITAM.	
	All Contributions
. Individuals	3 000.00
Corporations	<u> </u>
Unincorporated Business/Commercial Organizations	350.00
Trade Unions	400.00
Non-profit Organizations	
Other Identifiable Contributors	
Total	\$ 3750.00 A
Anonymous contributions	\$ J B
Total contributions (A + B)	\$ 3750.00 C
Total significant contributions (must equal box A on all forms 4224)	\$ 3750.00
Total contributions of less than \$100	\$ 0
Number of contributors who gave less than \$100	# 2
Number of anonymous contributors	# &

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



NAME OF CANDIDATE		10		PAGE /
B/91.	RY F. CUNNING/	tana	T	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
2014/19/06	1		n/	1,000-03
2014/10/06	MACKEN ZIE FURNITURE LATO. ROBEBY, BRIANEBY	150-18TAVE. WEST. PRINCE RUPERT VET-148	2	100 - 00
2014/10/15	BARRY CUNNIAGHAM		1	500.00
2014/10/24	SKYLINE HOLDINGS HIMA KAINTH, CAPPUE CU	1200 SUMMIT AVE. NEXINEITAM. V&5-2AS 337-8FRANGEAST PRACE NC-17AM. PUPELT V85-2M7	2	250.00
2014/10/30	PSAC NORTH WEST AREA. BE GOMES., BARRY CLUMP!	337-81 AVE EAST- PRAC WC-11AM PUPERT V85-2M7	4	400.00
	DARRY CLANNINGHAM		a /	(,000.00
20Hf/10/31	SHEILA SEIDE MAN.		1	100-00
2014/11/06	BARAY CUNDINGHAM		1	300.00
2014/11/11	ARAFUR STACE-SMIPT		1	100.00
	·	1		
		·		
			-	
F NEEDED, ATTACH AC CLASS OF CONTRIBU 1 - INDIVIDUAL, 2 - CO		IMERCIAL ORGANIZATION CONTRIBU	TOTAL A	3750.00

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS **LOCAL ELECTIONS CANDIDATE**



NAME OF CANDIDATE BAPRY F. C	UNNING	14 April			PAGE /
NSTRUCTIONS: Complete one s Attach addition	heet for each prohibi al forms if necessary	ited campaign con	tribution 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)		A CONTRACTOR
Complete this field if the prohibi NAME OF INDIVIDUAL	ted campaign contrik	oution was receive	d from an individua	l:	
Complete these fields if the proh			ived from an organi		
NAME OF ORGANIZATION	manon ontilpaigh ooi				CLASS*
MAILING ADDRESS					

^{*} 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

NAME OF CANDIDATE	Y F. CUNDINGHAM	,	PAGE /
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

NAME OF CANDIDATE	4	F. CUNNING ITAM		PAGE /
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AM	IOUNT
TYPE:		TOTAL	A 20	D
D – Dividends of shares pa S – Surplus funds from pre F – Fundraising income no D – Other (describe)	aid by credit evious electi it reported a	union on returned by jurisdiction s a campaign contribution	<u> </u>	

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE





ر م) (م	ELECTIONS A non-partisan Office of the Lec	84.
	A non-partisan Office of the Lec	islature

	NINCHAI			OF _
PATE OF EVENT (YYYY/MM/DD) DESCRIPT	TON OF FUNDRAISING EVE	:NI		
Income reported as campaign contribut	ions			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				
Tota	l income reported as	campaign contributior	ns G	
Remember to report all campaign contri			npaign Contributio	ns by Class,
and if applicable, on form 4224 - Signific				
Other income not reported as campaign	contributions			
	contributions Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	1580.78	1580.78
Internet		
Newspaper, magazine, journal	735.43	735.6
Radio		
Signs and billboards	2406.64	7406,60
Television		,
Other advertising	464.45	4 GG. 4.
CAMPAIGN ADMINISTRATION		
Salaries and wages		
Rent, insurance and utilities		
Courier and postage	141.00	141-00
Furniture and equipment		
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions		`
Research and polling		
Interest		
XCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe)		
person		
Total Expenses	A 5328.30	В 5328.3
	0 000	**

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE BARRY F. CUNNINC-IFAM			
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 &

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

				PAGE /
NAME OF CANDIDATE BARRY		F. CUNDING-HAM		OF OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION		AMOUNT
2014/11/183	O	IFALL RENTAL FOR OPEN HOUSE		Mo. 33
2014/11/03	D	FOED FOR OPEN HOUSE		92,37
2014/11/17	О	FOOD FOR VOLUNTEERS		90.00
भाषीप/17	0	EDOD FOR VOLUNTEERS.		114.05
	B	BANK CHARGES		35.88
	:			
				10% pts
* TYPE: B – Bank fees E – Intended election expe	ense that wa	TOTAL as not used	Α	372.30

F - Payments made for fundraising purposes

N – Nomination deposit O – Other (describe)

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE







NAME OF CANDIDATE BARRY F. CUNNI	NC-IAM		PAGE /		
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

1 11/10			
IAME OF CANDIDATE BARRY 6.	CUNNINGIFAM		PAGE /
	s own campaign accounts in same jurisdiction		
	PURPOSE		AMOUNT
CHANGE CAMI	PMIEN ACCOUNT FROM PERSON	AL	
40 BUSIN	ESS ACCOUNT FROM PERSON		454.23
ansfers from candidate's ow	n campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
		TOTAL A	
DATE OF TRANSFER (YYYY/MM/DD)	campaign accounts in other jurisdictions PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
		TOTAL B	454.2
. Т	he amounts in boxes A and B must be carried forward to form	4222.	

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	CUNNING HAM.	
	Balance remaining in campaign account(s) after payment of all expenses	149.40 A
	Total amount of campaign contributions from candidate	7 6 m. p B
Amount reimbursed to car	ndidate from campaign account for the candidate's contributions to their campaign	149.48 C
	Date of reimbursement to candidate (YYYY/MM/DD)	2014/12/29.
	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

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE			
Free advertising provided by jurisdiction			
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)	
		,	
	•		
		ð	

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE BARRY E. CLEWWY.	WEHAM.			
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 CO	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 CO	DDE	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 CO	DDE	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 CO	DDE	EMAIL (IF AVAILABLE)