

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

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Amendment # _____

CANDIDATE'S FULL NAME Jaime Michelle Massey		GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) School Trustee	
MAILING ADDRESS Box 2886		PHONE NO. 250-442-8756	
CITY / TOWN Grand Forks	POSTAL CODE v0h 1h0	EMAIL (IF AVAILABLE) jaimemassey@telus.net	
JURISDICTION Grand Forks City			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) Trustee electoral area #1			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) NA			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) NA			
FINANCIAL AGENT'S LAST NAME NA	FIRST NAME NA	MIDDLE NAME NA	
FINANCIAL AGENT'S MAILING ADDRESS NA		PHONE NO. NA	
CITY / TOWN NA	POSTAL CODE NA NA	EMAIL (IF AVAILABLE) NA	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) NA	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 ☒Transfers 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 ☒

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS
LOCAL ELECTIONS CANDIDATE

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NAME OF CANDIDATE

Jaime Massey

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* (LECFA).

SIGNATURE OF CANDIDATE

DATE: (YYYY/MM/DD)

2015/01/20

PRINTED NAME OF CANDIDATE

Jaime Massey

SIGNATURE OF FINANCIAL AGENT

DATE: (YYYY/MM/DD)

PRINTED NAME OF FINANCIAL AGENT

Campaign accounts:

NAME OF SAVINGS INSTITUTION

Grand Forks and District Savings Credit Union

ADDRESS

447 Market ave. Box 2500 Grand Forks B.C. V0h 1h0

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
Jaime Michelle Massey

Total value of campaign contributions from all sources (from box C on form 4223) 0.00

Transfers received from elector organization (from box A on form 4226) 0.00

Total other permissible deposits (from box A on form 4227) 0.00

Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233) 0.00

Total Income (sum of above boxes) 0.00 A

Election expenses (from box A on form 4229) 233.32

Transfers to elector organization (from box A on form 4230) 0.00

Total other permissible payments (from box A on form 4231) 0.00

Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233) 0.00

Amount of surplus funds disbursed (from box A on form 4234) 0.00

Total Expenditures (sum of above boxes) 233.32 B

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

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NAME OF CANDIDATE

Jaime Michelle Massey

All Contributions

Individuals	0.00
Corporations	0.00
Unincorporated Business/Commercial Organizations	0.00
Trade Unions	0.00
Non-profit Organizations	0.00
Other Identifiable Contributors	0.00
Total	\$ 0.00 A

Anonymous contributions	\$ 0.00	B
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Total contributions (A + B)	\$ 0.00	C
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Total significant contributions (must equal box A on all forms 4224)	\$ 0.00
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Total contributions of less than \$100	\$ 0.00
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Number of contributors who gave less than \$100	# 0
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Number of anonymous contributors	# 0
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4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS**LOCAL ELECTIONS CANDIDATE**

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NAME OF CANDIDATE

Jaime Michelle Massey

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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

NA

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

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NAME OF CANDIDATE Jaime Michelle Massey	PAGE OF
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[illegible]

*Also include legal name if different than ballot name.

TOTAL	A	0.00
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4228 - FUNDRAISING FUNCTION TICKET SALES**LOCAL ELECTIONS CANDIDATE**

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE Jaime Michelle Massey		PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT NA	

Income reported as campaign contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Purchases by individuals of more than \$250 worth of tickets	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Purchases by individuals of tickets that are more than \$50 each	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Total income reported as campaign contributions			<input style="width: 100%;" type="text"/>	

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	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

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

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NAME OF CANDIDATE

Jaime Michelle Massey

	Column A Election Expenses	Column B Election Proceedings Period Expenses
ADVERTISING		
Brochures, pamphlets and flyers	0.00	0.00
Internet	43.23	43.23
Newspaper, magazine, journal	0.00	0.00
Radio	0.00	0.00
Signs and billboards	141.05	141.05
Television	0.00	0.00
Other advertising	36.20	16.04
CAMPAIGN ADMINISTRATION		
Salaries and wages	0.00	0.00
Rent, insurance and utilities	0.00	0.00
Courier and postage	0.00	0.00
Furniture and equipment	0.00	0.00
Office supplies	0.00	0.00
Professional services	0.00	0.00
Other campaign administration expenses	0.00	0.00
Conventions and meetings	0.00	0.00
Other campaign related functions	0.00	0.00
Research and polling	0.00	0.00
Interest	0.00	0.00
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses	12.84	
Interest on loans for election expenses	0.00	
Legal and accounting services	0.00	
Financial agent services	0.00	
Other expenses (describe)		
Total Expenses	A 233.32	B 200.32

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.

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

Jaime Michelle Massey

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DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
TOTAL			A 0.00

*Also include legal name if different than ballot name.

This form is available for public inspection.

ORIGINAL — ELECTIONS BC

PLEASE KEEP A COPY FOR YOUR RECORDS

This information is collected to administer the *Local Elections Campaign Financing Act*.

Questions? Contact: Privacy Officer, Elections BC

1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6

**4231 - OTHER PERMISSIBLE PAYMENTS
FROM CAMPAIGN ACCOUNT
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE

Jaime Michelle Massey

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DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
2014/10/31	B	Service Charge	3.25
2014/11/30	B	Service Charge	6.25
2014/12/31	B	Service Charge	3.25
2014/12/31	B	OD excess balance interest charge	0.09
TOTAL			12.84

* TYPE:

B – Bank fees

E – Intended election expense that was not used

F – Payments made for fundraising purposes

N – Nomination deposit

O – Other (describe)

This form is available for public inspection.

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4232 - SHARED ELECTION EXPENSE**LOCAL ELECTIONS CANDIDATE**

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE

Jaime Michelle Massey

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DESCRIPTION OF SHARED EXPENSE

Rental of room and marketing of shared meet and greet.

Total value of shared election expense

55.00

Candidate's portion of shared election expense*

27.50

Amount paid directly to supplier (if applicable)

0.00

Amount of reimbursements given to other candidate(s)

0.00

Amount of reimbursements received from other candidates

0.00

***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
Dick	Lorraine	Heather

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE

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NAME OF CANDIDATE
Jaime Michelle Massey

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Transfers between candidate's own campaign accounts in same jurisdiction

PURPOSE	AMOUNT
NA	

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 <input type="text"/>

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 <input type="text"/>

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



NAME OF CANDIDATE
Jaime Michelle Massey

Balance remaining in campaign account(s) after payment of all expenses	0.00	A
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Total amount of campaign contributions from candidate	186.76	B
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Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign	186.76	C
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Date of reimbursement to candidate (YYYY/MM/DD)	2015/01/20
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Amount of remaining surplus funds (after any reimbursement under box C)	0.00	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).

[illegible]

LOCAL ELECTIONS CANDIDATE



ELECTIONS BC
A non-partisan Office of the Legislature

Jaime Michelle Massey

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4236 - PREVIOUS FINANCIAL AGENTS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE Jaime Michelle Massey			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME NA		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)