4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



| PLEASE PRINT IN BLOCK LETTERS | Amendment # |
|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| BALLOT NAME (IF DIFFERENT FROM ABOVE) MAILING ADDRESS | GENERAL VOTING DAY (YYYY/MM/DD) OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) SCHOOL TOUS HEC. |
| CITY/TOWN Grand Forks | POSTAL CODE EMAIL (IF AVAILABLE) VOH 1 Ha Jepsen 5@ felus. not |
| ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) | hool District 51' |
| LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) | |
| FINANCIAL AGENT'S LAST NAME FINANCIAL AGENT'S MAILING ADDRESS 25 9 6 75 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | PHONE NO. 250 LH2 - 8782 POSTAL CODE EMAIL (IF AVAILABLE) VOH IH2 Jepsen 50 felus not e were previous financial agents, complete form 4236. 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 Campalgn 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



| NAME OF CANDIDATE Kate Jepsen | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | |
| Declaration: | |
| I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely a required under the Local Elections Campaign Financing Act (LECFA). | and accurately discloses the information |
| SIGNATURE OF CANDIDATE | DATE: (YYYY/MM/DD) |
| 4000 Jepsen | 2015/01/12 |
| PRINTED NAME OF CANDIDATE Katie Jepsen | , , |
| | page and page and page and a page |
| SIGNATURE OF FINANCIAL AGENT | DATE: (YYYY/MM/DD) 2015/61/12 |
| PRINTED NAME OF FINANCIAL AGENT Kate Jeosen | 1 |
| Campaign accounts: | |
| NAME OF SAVINGS INSTITUTION | |
| ADDRESS 7310 2nd St Box 670 Grandfor | to BC VOH IHA |
| 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 | | |
|------------------------------------------------------------------------------------------|--------|---|
| Total value of campaign contributions from all sources (from box C on form 4223) | 0 | |
| 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) | 0 | A |
| Election expenses (from box A on form 4229) | 760 38 |] |
| Transfers to elector organization (from box A on form 4230) | 0 |] |
| Total other permissible payments (from box A on form 4231) | 0 | |
| 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) | 0 | |
| Total Expenditures (sum of above boxes) | 76038 | В |

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



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

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



| NAME OF CANDIDATE | Katre Teac | ಲ | | 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 |
| | | | | |
| | 1,000 | | | |
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| F NEEDED, ATTACH ADD CLASS OF CONTRIBUTO 1 - INDIVIDUAL, 2 - COR | DITIONAL FORMS OR: RPORATION, 3 UNINCORPORATED BUSINESS/COI | MMERCIAL ORGANIZATION CONTRIBU | TOTAL JTIONS | A 6 |

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



| INSTRUCTIONS: Complete one state Attach additional | neet for each prohibing forms if necessary | | tribution received. | | PAGE |
|----------------------------------------------------|--------------------------------------------|--------------------|----------------------------------|---------|--------------------------------------------------|
| RECEIVED FROM INDIVIDUAL ORGANIZATION | DATE RECEIVED (YYYY/MM/DD) | \$ VALUE | DATE RETURNED (YYYY/MM/DD) | OR | DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD) |
| ☐ ANONYMOUS | | | | | |
| DESCRIPTION OF HOW THE PROHIBITED CO | | | d from an individual | [: | |
| NAME OF INDIVIDUAL | | | | | |
| Complete these fields if the proh | ibited campaign con | tribution was rece | ived from an organi | zation: | |
| NAME OF ORGANIZATION | | | | | 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

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION



LOCAL ELECTIONS CANDIDATE

| NAME OF CANDIDATE | Katre Jepse | S | PAGE |
|-------------------------------------|--------------------------------------|-------------------------------|----------------------|
| DATE OF TRANSFER (YYYY/MM/DD) | BALLOT NAME OF ELECTOR ORGANIZATION* | DESCRIPTION (IF NON-MONETARY) | VALUE OF TRANSFER |
| _ | | | |
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| Also include legal name if | different than ballot name. | TOTAL | A 0 |

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

| NAME OF CANDIDATE | ate Jopsen | | OF |
|-------------------------------------------------------------|-------------|-----|-------|
| DATE (YYYY/MM/DD) TYPE* | DESCRIPTION | AM | IOUNT |
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| TYPE: I – Interest D – Dividends of shares paid by credit u | TOTAL | - A | Ò |

S – Surplus funds from previous election returned by jurisdiction

F - Fundraising income not reported as a campaign contribution

O - Other (describe)

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE



SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD

| ه. ده | (100%) 100% 100% | ECT -partisan | 10 | NS | |
|-------|------------------------|------------------|--------|-----------|-----------|
| | A non | partisan | Office | of the Le | gislature |

| DATE OF EVENT (YYYY/MM/DD) DESCRIPT | ION OF FUNDRAISING EVE | NT . | | OF _ | |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------------|----------------------------|-------------------------------------------|--|
| | | | | | |
| Income reported as campaign contribut | ions | | | | |
| | 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 | | | | | |
| Tota | I income reported as | campaign contribution | ns | | |
| | | | | | |
| Remember to report all campaign contri and if applicable, on form 4224 - Signific Other income not reported as campaign | cant Contributors (\$ | | mpaign Contributio | ns by Class, | |

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



| DVERTISING Brochures, pamphlets and flyers Internet Newspaper, magazine, journal Radio Signs and billboards Television Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage Furniture and equipment | Election Expenses 291 06 10253 165 19 20160 | Election Proceedings Period Expenses |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|--------------------------------------|
| Brochures, pamphlets and flyers Internet Newspaper, magazine, journal Radio Signs and billboards Television Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 10253 | |
| Newspaper, magazine, journal Radio Signs and billboards Television Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 165 19 | |
| Radio Signs and billboards Television Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 165 19 | |
| Signs and billboards Television Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 165 19 | |
| Television Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 105 | |
| Other advertising AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 20160 | |
| AMPAIGN ADMINISTRATION Salaries and wages Rent, insurance and utilities Courier and postage | 20166 | |
| Salaries and wages Rent, insurance and utilities Courier and postage | | |
| Rent, insurance and utilities Courier and postage | | |
| 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 | | |
| XCLUSIONS THAT MUST BE REPORTED | | |
| Personal election expenses | | |
| Interest on loans for election expenses | | |
| Legal and accounting services | | |
| Financial agent services | | |
| ther expenses (describe) | | |
| | | |
| Total Expenses | 760 38 | В |

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



| NAME OF CANDIDATE | Katre Jose | } | PAGE OF |
|-------------------------------------|--------------------------------------|-------------------------------|----------------------|
| DATE OF TRANSFER (YYYY/MM/DD) | BALLOT NAME OF ELECTOR ORGANIZATION* | DESCRIPTION (IF NON-MONETARY) | VALUE OF TRANSFER |
| | | | 0 |
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| *Also include legal name if | different than ballot name. | TOTAL | . A O |

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

| NAME OF CANDIDATE Kaste Jepsen | | | PAGE OF | |
|-------------------------------------------------|-------|-------------|---------|------|
| DATE (YYYY/MM/DD) | TYPE* | DESCRIPTION | AN | OUNT |
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| TYPE: B - Bank fees F - Intended election excel | | TOTAL | A (| 7 |

F - Payments made for fundraising purposes

N - Nomination deposit O - Other (describe)

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE





| ه ا | ELECTIONS A non-partisan Office of the Leg | 1340 | | |
|--------|---------------------------------------------------|------|--|--|
| | A non-partisan Office of the Legislature | | | |

| IAME OF CANDIDATE | Katre Jepsen | PAGE OF OF |
|-------------------------------|-------------------------------------------|------------------------------------------|
| DESCRIPTION OF SHARED EXPENSE | - | |
| | Total value of sh | nared election expense |
| | Candidate's portion of sha | ared election expense* |
| | Amount paid directly to | o supplier (if applicable) |
| | Amount of reimbursements give | en to other candidate(s) |
| | Amount of reimbursements received | d from other candidates |
| Election Expenses. | r portion of the shared expense as an ele | ection expense on form 4229 - Summary of |
| LAST NAME | FIRST NAME | MIDDLE NAME |
| | | |
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4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

| K | atre Jepsen | | | OF |
|----------------------------------|---------------------------------------------------|-------|---|--------|
| | \ s own campaign accounts in same jurisdiction | | | |
| | PURPOSE | | | AMOUNT |
| | | | | |
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| | | | | |
| sfers from candidate's ow | n campaign accounts in other jurisdictions | | | |
| DATE OF TRANSFER (YYYY/MM/DD) | PURPOSE (INCLUDE NAME OF OTHER JURISDICTION) | | | AMOUNT |
| | | | | |
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| | | | | |
| | | TOTAL | Α | |
| sfers to candidate's own | campaign accounts in other jurisdictions | | | |
| DATE OF TRANSFER (YYYY/MM/DD) | PURPOSE (INCLUDE NAME OF OTHER JURISDICTION) | | | AMOUNT |
| | | | | |
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| | | | | |
| | | | | |
| | | TOTAL | | _ |

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



| NAME OF CANDIDATE | Katre Jepsen | |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|--------|
| | | |
| | Balance remaining in campaign account(s) after payment of all expenses | 0 A |
| | Total amount of campaign contributions from candidate | В |
| Amount reimbursed to car | ndidate from campaign account for the candidate's contributions to their campaign | С |
| | Date of reimbursement to candidate (YYYY/MM/DD) | · |
| | Amount of remaining surplus funds (after any reimbursement under box C) | D |
| If the amount in Box D | o 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 |
| - | | |
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4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



| NAME OF CANDIDATE | Kate Jepser | S | | | |
|-----------------------------------------------------|--------------|----------------------------------------------|--|--|--|
| Free advertising provided by jurisdiction | | | | | |
| DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD) | JURISDICTION | MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.) | | | |
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4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



| NAME OF CANDIDATE Kate J | essen | | |
|--------------------------------------------|------------|---------------------------------------|----------------------|
| EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) | | | |
| FINANCIAL AGENT'S LAST NAME | FIRST NAME | . 1102 | 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 | EMÁIL (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) |