

# 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

## LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # \_\_\_\_\_

CANDIDATE'S FULL NAME <b>HEATHER MARIAN ANDERSON</b>		GENERAL VOTING DAY (YYYY/MM/DD) <b>2014/11/15</b>
BALLOT NAME (IF DIFFERENT FROM ABOVE) <b>HEATHER ANDERSON</b>		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>MAYOR</b>
MAILING ADDRESS <b>2982 SUNNYSIDE ROAD</b>		PHONE NO. <b>604-469-0929</b>
CITY / TOWN <b>ANMORE</b>	POSTAL CODE <b>V3H 4Y7</b>	EMAIL (IF AVAILABLE) <b>HEATHER.M.ANDERSON@TELUS.NET</b>
JURISDICTION <b>VILLAGE OF ANMORE</b>		
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 <b>ANDERSON</b>	FIRST NAME <b>MARILYN</b>	MIDDLE NAME <b>ETHEL</b>
FINANCIAL AGENT'S MAILING ADDRESS <b>2984 EAGLECREST DRIVE</b>		PHONE NO. <b>604-469-1626</b>
CITY / TOWN <b>ANMORE</b>	POSTAL CODE <b>V3H 5G6</b>	EMAIL (IF AVAILABLE) <b>MARILYA@SHAW.CA</b>
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014/09/28</b>	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	HEATHER MARIAN ANDERSON
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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 (LECFA)*.

SIGNATURE OF CANDIDATE <i>Heather Anderson</i>	DATE: (YYYY/MM/DD) 2015/01/19
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PRINTED NAME OF CANDIDATE HEATHER ANDERSON
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SIGNATURE OF FINANCIAL AGENT <i>Marilyn Anderson</i>	DATE: (YYYY/MM/DD) 2015/01/19
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PRINTED NAME OF FINANCIAL AGENT MARILYN ANDERSON
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**Campaign accounts:**

NAME OF SAVINGS INSTITUTION COAST CAPITAL SAVINGS
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ADDRESS WESTWOOD MALL, COQUITLAM, B.C.
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NAME OF SAVINGS INSTITUTION
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ADDRESS
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NAME OF SAVINGS INSTITUTION
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ADDRESS
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NAME OF SAVINGS INSTITUTION
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ADDRESS
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**4222 - STATEMENT OF INCOME AND EXPENSES****LOCAL ELECTIONS CANDIDATE**

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NAME OF CANDIDATE

HEATHER MARIAN ANDERSON

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

3450.

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

N/A

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

393.43

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

N/A

Total Income (sum of above boxes)

3843.43 A

Election expenses (from box A on form 4229)

6257.97

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

N/A

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

26.65

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

N/A

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

6.81

Total Expenditures (sum of above boxes)

6291.43 B

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

HEATHER MARIAN ANDERSON

All Contributions

Individuals	0	
Corporations	0	
Unincorporated Business/Commercial Organizations	0	
Trade Unions	3450.	
Non-profit Organizations	0	
Other Identifiable Contributors	0	
Total	\$ 3450.	A

Anonymous contributions \$ 0 B

Total contributions (A + B) \$ 3450. C

Total significant contributions (must equal box A on all forms 4224) \$ 3450.

Total contributions of less than \$100 \$ 0

Number of contributors who gave less than \$100 # 0

Number of anonymous contributors # 0

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE **HEATHER MARIAN ANDERSON** PAGE **1**  
OF **1**

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
2014/10/20	CANADIAN UNION OF PUBLIC EMPLOYEES-LOCAL 561 (DAVE GINTER, BRUCE RICHARDSON)	202- 2189 AUSTIN AVE. COQUITLAM, B.C. V3K 3R9	4	400.
2014/10/20	CANADIAN UNION OF PUBLIC EMPLOYEES - NATIONAL ASSN. (PAUL MOIST, CHARLES FLEURY)	1375 ST LAURENT OTTAWA, ONTARIO K1G 0Z7	4	400.
2014/10/20	CANADIAN UNION OF PUBLIC EMPLOYEES - B.C. DIVISION (MARK HANCOCK, PAUL FADRO)	510- 4940 CANADA WAY BURNABY, B.C. V5G 4T3	4	400.
2014/11/12	CANADIAN UNION OF PUBLIC EMPLOYEES - B.C. DIVISION (MARK HANCOCK, PAUL FADRO)	510- 4940 CANADA WAY BURNABY, B.C. V5G 4T3	4	1000.
2014/12/06	CANADIAN UNION OF PUBLIC EMPLOYEES - B.C. DIVISION (MARK HANCOCK, PAUL FADRO)	510- 4940 CANADA WAY BURNABY, B.C. V5G 4T3	4	500.
2014/10/25	CANADIAN UNION OF PUBLIC EMPLOYEES - LOCAL 873 - (BRONWYN BARTER, TOM MANZ)	105- 21900 WESTMINSTER HWY- RICHMOND, B.C. V6V 0A8	4	500.
2014/11/17	CANADIAN UNION OF PUBLIC EMPLOYEES - LOCAL 498 (BRIAN SAVAGE, DAVID MURRAY)	203- 2571 SHAUGHNESSY ST PORT COQUITLAM, B.C. V3C 3G3	4	250.

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 3450.**

# 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 1.5em; font-family: cursive; text-align: center;">HEATHER MARIAN ANDERSON</div>	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
<b>INSTRUCTIONS:</b> 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

N/A

**4226 - TRANSFERS RECEIVED  
FROM ELECTOR ORGANIZATION**  
**LOCAL ELECTIONS CANDIDATE**



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE **HEATHER MARIAN ANDERSON**

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

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

\*Also include legal name if different than ballot name.





# 4228 - FUNDRAISING FUNCTION TICKET SALES

## LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <b>HEATHER MARIAN ANDERSON</b>		PAGE <input style="width: 20px;" type="text" value="1"/>
		OF <input style="width: 20px;" type="text" value="1"/>
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT <b>N/A</b>	

**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="checkbox"/>
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="checkbox"/>
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="checkbox"/>
Total income reported as campaign contributions				
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="checkbox"/>

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="checkbox"/>

# 4229 - SUMMARY OF ELECTION EXPENSES

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE **HEATHER MARIAN ANDERSON**

	Column A Election Expenses	Column B Election Proceedings Period Expenses
<b>ADVERTISING</b>		
Brochures, pamphlets and flyers	697.76	697.76
Internet		
Newspaper, magazine, journal	130.00	130.00
Radio		
Signs and billboards	2703.82	2703.82
Television		
Other advertising		
<b>CAMPAIGN ADMINISTRATION</b>		
Salaries and wages		
Rent, insurance and utilities		
Courier and postage	108.99	108.99
Furniture and equipment		
Office supplies	64.01	64.01
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions	2151.54	2151.54
Research and polling		
Interest		
<b>EXCLUSIONS THAT MUST BE REPORTED</b>		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe) <b>THANK YOU GIFT CARDS</b>	401.85	401.85
<b>Total Expenses</b>	<b>A 6257.97</b>	<b>B 6257.97</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.







**4233 - TRANSFERS BETWEEN CANDIDATE'S  
OWN CAMPAIGN ACCOUNTS**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE **HEATHER MARIAN ANDERSON**

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

**Transfers between candidate's own campaign accounts in same jurisdiction**

PURPOSE	AMOUNT
N/A	

**Transfers from candidate's own campaign accounts in other jurisdictions**

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		<b>A</b>

**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>B</b>

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  
 HEATHER MARIAN ANDERSON

Balance remaining in campaign account(s) after payment of all expenses  **A**

Total amount of campaign contributions from candidate  **B**

Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign  **C**

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 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
2015/01/23	BALANCE PAID TO THE CANDIDATE	6.81





**4236 - PREVIOUS FINANCIAL AGENTS**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE <b>HEATHER MARIAN ANDERSON</b>			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		<b>N/A</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)
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)