

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME JAMES CHARLES ELLIOTT		GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR	
MAILING ADDRESS 2209-13th AVE SU4714		PHONE NO. 250-464-5435	
CITY/TOWN CRANBROOK BC	POSTAL CODE V1C 10A6	EMAIL (IF AVAILABLE)	
JURISDICTION CRANBROOK CITY			
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		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.	
CITY/TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	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 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 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 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"/> |

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



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Amendment # _____

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BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR	
MAILING ADDRESS 2209-13th AVE SOUTH		PHONE NO. 250-464-5435	
CITY/TOWN CRANBROOK BC	POSTAL CODE V1C 1A6	EMAIL (IF AVAILABLE)	
JURISDICTION CRANBROOK CITY			
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		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.	
CITY/TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)	
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| Fundraising Function Ticket Sales – Form 4228 <input checked="" type="checkbox"/> | Previous Financial Agents – Form 4236 <input checked="" type="checkbox"/> |

SEE AMENDMENT

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <i>JAMES ELLIOTT</i>

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>James C Elliott</i>	DATE: (YYYY/MM/DD) <i>2014/11/21</i>
PRINTED NAME OF CANDIDATE JAMES C ELLIOTT	

SIGNATURE OF FINANCIAL AGENT _____	DATE: (YYYY/MM/DD) _____
PRINTED NAME OF FINANCIAL AGENT _____	

Campaign accounts:

NAME OF SAVINGS INSTITUTION <i>CRANBROOK CREDIT UNION</i>
ADDRESS <i>920 BAKER STREET</i>

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 JAMES KHLOTT

Total value of campaign contributions from all sources (from box C on form 4223)	<input type="text" value="0"/>	
Transfers received from elector organization (from box A on form 4226)	<input type="text" value="0"/>	
Total other permissible deposits (from box A on form 4227)	<input type="text" value="0"/>	
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	<input type="text" value="0"/>	
Total Income (sum of above boxes)	<input type="text" value="0"/>	A
Election expenses (from box A on form 4229)	<input type="text" value="0"/>	
Transfers to elector organization (from box A on form 4230)	<input type="text" value="0"/>	
Total other permissible payments (from box A on form 4231)	<input type="text" value="0"/>	
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	<input type="text" value="0"/>	
Amount of surplus funds disbursed (from box A on form 4234)	<input type="text" value="0"/>	
Total Expenditures (sum of above boxes)	<input type="text" value="0"/>	B

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

JAME S ELLIOTT

All Contributions

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

Anonymous contributions \$ **B**

Total contributions (A + B) \$ **C**

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

Total contributions of less than \$100 \$

Number of contributors who gave less than \$100 #

Number of anonymous contributors #

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 2em; font-family: cursive; margin-left: 100px;">JAMES ELLIOTT</div>	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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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

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 <i>SAMES ELLIOTT</i>		PAGE <input style="width: 30px;" type="text"/>
DATE OF EVENT (YYYY/MM/DD)		OF <input style="width: 30px;" type="text"/>
DESCRIPTION OF FUNDRAISING EVENT		

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 type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>
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				<input type="checkbox"/>

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

JAMES ELLIOTT

Column A

Column B

Election Expenses

Election Proceedings Period Expenses

ADVERTISING

- Brochures, pamphlets and flyers
- Internet
- Newspaper, magazine, journal
- Radio
- Signs and billboards
- Television
- Other advertising

<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>

CAMPAIGN ADMINISTRATION

- Salaries and wages
- Rent, insurance and utilities
- 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

<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>

EXCLUSIONS THAT MUST BE REPORTED

- Personal election expenses
- Interest on loans for election expenses
- Legal and accounting services
- Financial agent services

<i>0</i>
<i>0</i>
<i>0</i>
<i>0</i>

Other expenses (describe)

--

Total Expenses

A	<i>0</i>
----------	----------

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.

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: JAMES EBWOTT PAGE: OF:

Table with 4 columns: DATE (YYYY/MM/DD), TYPE*, DESCRIPTION, AMOUNT. Multiple empty rows for data entry.

TOTAL A 0

- *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. ORIGINAL - ELECTIONS BC PLEASE KEEP A COPY FOR YOUR RECORDS

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



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NAME OF CANDIDATE
JAMES ELLIOTT

PAGE
OF

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		

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		

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

4235 - FREE ADVERTISING FROM JURISDICTION
LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE
JAMES ELLIOTT

Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
2014/07/14	CRAWBROOK CITY	LOCAL PAPER (TOWNSMAN)
2014 OCTOBER/10/16	CRAWBROOK CITY	RADIO 102.9
2014 OCTOBER/10/15	CRAWBROOK CITY	LOCAL PAPER TOWNSMAN
2014 OCTOBER 2015	CRAWBROOK CITY	LOCAL PAPER TOWNSMAN
2014/10/17	CRAWBROOK CITY	WEBSITE (EAGLE BOOK)
2014/10/18	CITY CAB	WEBSITE (EKNOW)
2014/11/14	CRAWBROOK CITY	LOCAL PAPER TOWNSMAN

4235 - FREE ADVERTISING FROM JURISDICTION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

JAMES ELLIOTT

Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
2014/09/14	CRAWBROOK CITY	LOCAL PAPER (TOWNSMAN)
2014 OCTOBER 10/06	CRAWBROOK CITY	RADIO 102.9
2014 OCTOBER 10/15	CRAWBROOK CITY	LOCAL PAPER TOWNSMAN
2014 OCTOBER 20/15	CRAWBROOK CITY	LOCAL PAPER ADVERTISER
2014/10/17	CRAWBROOK CITY	WEBSITE (FACE BOOK)
2014/10/18	CITY CAB	WEBSITE (REKNOW)
2014/11/14	CRAWBROOK CITY	LOCAL PAPER TOWNSMAN

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE		
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)