

**4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT**

**LOCAL ELECTIONS CANDIDATE**



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

CANDIDATE'S FULL NAME <b>DONALD Alex LOHYIN</b>		GENERAL VOTING DAY (YYYY/MM/DD) <b>Nov. 15, 2014</b>	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>COUNCILLOR</b>	
MAILING ADDRESS <b>130 FORD Avenue</b>		PHONE NO. <b>250-954-0146</b>	<del><b>250-616-0789</b></del>
CITY / TOWN <b>PARKSVILLE, B.C.</b>	POSTAL CODE <b>V9P 1M1</b>	EMAIL (IF AVAILABLE) <b>spiritwalker47@yahoo.ca</b>	
JURISDICTION <b>PARKSVILLE</b>			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) <b>N/A</b>			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>N/A</b>			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>N/A</b>			
FINANCIAL AGENT'S LAST NAME <i>Agd.</i> <b>LO HIAN</b>		FIRST NAME <b>DONALD</b>	MIDDLE NAME <b>ALEX</b>
FINANCIAL AGENT'S MAILING ADDRESS <b>130 FORD AVENUE</b>		PHONE NO. <b>250-616-0789</b>	
CITY / TOWN <b>PARKSVILLE</b>	POSTAL CODE <b>V9P 1M1</b>	EMAIL (IF AVAILABLE) <b>spiritwalker47@yahoo.ca</b>	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014/10/15</b>	If there were previous financial agents, complete form 4236.		
<input type="checkbox"/> Tick if candidate was registered as a third party sponsor		<input checked="" type="checkbox"/> Tick if candidate acted as a campaign organizer <b>N/A</b>	
This disclosure statement includes the following forms:			
Declarations and Campaign Accounts -- Form 4221 <input checked="" type="checkbox"/>	Summary of Election Expenses -- Form 4229 <input type="checkbox"/>		
Statement of Income and Expenses -- Form 4222 <input checked="" type="checkbox"/>	Transfers Given to Elector Organization -- Form 4230 <input type="checkbox"/>		
Summary of Campaign Contributions by Class -- Form 4223 <input type="checkbox"/>	Other Permissible Payments -- Form 4231 <input type="checkbox"/>		
Significant Contributors (\$100 or more) -- Form 4224 <input type="checkbox"/>	Shared Election Expense -- Form 4232 <input type="checkbox"/>		
Prohibited Campaign Contributions -- Form 4225 <input type="checkbox"/>	Transfers Between Candidate's Own Accounts -- Form 4233 <input type="checkbox"/>		
Transfers Received from Elector Organization -- Form 4226 <input type="checkbox"/>	Disbursement of Surplus Funds -- Form 4234 <input type="checkbox"/>		
Other Permissible Deposits -- Form 4227 <input type="checkbox"/>	Free Advertising from Jurisdiction -- Form 4235 <input type="checkbox"/>		
Fundraising Function Ticket Sales -- Form 4228 <input type="checkbox"/>	Previous Financial Agents -- Form 4236 <input type="checkbox"/>		

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



**ELECTIONS BC**  
A non-partisan Office of the Legislature

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SEE AMENDMENT

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

CANDIDATE'S FULL NAME <b>DONALD Alex LOHYIN</b>		GENERAL VOTING DAY (YYYY/MM/DD) <b>Nov. 15, 2014</b>	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>Councillor</b>	
MAILING ADDRESS <b>130 FORD Avenue</b>		PHONE NO. <b>250-616-0789</b>	
CITY / TOWN <b>PARKSVILLE, B.C.</b>	POSTAL CODE <b>V9P 1M1</b>	EMAIL (IF AVAILABLE) <b>splitwalker47@yahoo.ca</b>	
JURISDICTION <b>PARKSVILLE</b>			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) <b>N/A</b>			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>N/A</b>			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>N/A</b>			
FINANCIAL AGENT'S LAST NAME <i>Dot.</i> <b>LOHYAN</b>	FIRST NAME <b>DONALD</b>	MIDDLE NAME <b>Alex</b>	
FINANCIAL AGENT'S MAILING ADDRESS <b>130 FORD AVENUE</b>		PHONE NO. <b>250-616-0789</b>	
CITY / TOWN <b>PARKSVILLE</b>	POSTAL CODE <b>V9P 1M1</b>	EMAIL (IF AVAILABLE) <b>splitwalker47@yahoo.ca</b>	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014/10/15</b>	If there were previous financial agents, complete form 4236.		
<input type="checkbox"/> Tick if candidate was registered as a third party sponsor		<input checked="" type="checkbox"/> 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 type="checkbox"/>
Statement of Income and Expenses – Form 4222	<input checked="" type="checkbox"/>	Transfers Given to Elector Organization – Form 4230	<input type="checkbox"/>
Summary of Campaign Contributions by Class – Form 4223	<input type="checkbox"/>	Other Permissible Payments – Form 4231	<input type="checkbox"/>
Significant Contributors (\$100 or more) – Form 4224	<input type="checkbox"/>	Shared Election Expense – Form 4232	<input type="checkbox"/>
Prohibited Campaign Contributions – Form 4225	<input type="checkbox"/>	Transfers Between Candidate's Own Accounts – Form 4233	<input type="checkbox"/>
Transfers Received from Elector Organization – Form 4226	<input type="checkbox"/>	Disbursement of Surplus Funds – Form 4234	<input type="checkbox"/>
Other Permissible Deposits – Form 4227	<input type="checkbox"/>	Free Advertising from Jurisdiction – Form 4235	<input type="checkbox"/>
Fundraising Function Ticket Sales – Form 4228	<input type="checkbox"/>	Previous Financial Agents – Form 4236	<input type="checkbox"/>

**4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS**

**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE <i>Donald Alex Lohvin</i>	
<p><b>Declaration:</b></p> <p>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 <i>Local Elections Campaign Financing Act (LECFA)</i>.</p>	
SIGNATURE OF CANDIDATE <i>Donald Alex Lohvin</i>	DATE: (YYYY/MM/DD) <i>Nov. 18, 2014</i>
PRINTED NAME OF CANDIDATE <i>DONALD Alex LOHVIN</i>	
SIGNATURE OF FINANCIAL AGENT <i>Donald Alex Lohvin</i>	DATE: (YYYY/MM/DD) <i>Nov. 18, 2014</i>
PRINTED NAME OF FINANCIAL AGENT <i>DONALD Alex LOHVIN</i>	
<b>Campaign accounts:</b>	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	

**4222 - STATEMENT OF INCOME AND EXPENSES**

**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  
**DONALD Alex LOHVIN**

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

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

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

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

**Total Income** (sum of above boxes)  **A**

Election expenses (from box A on form 4229)

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

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

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

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

**Total Expenditures** (sum of above boxes)  **B**