

# 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

## LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

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

CANDIDATE'S FULL NAME <i>MERLIN CHARLES NICHOLS</i>		GENERAL VOTING DAY (YYYY/MM/DD) <i>2014 11 15</i>
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <i>MAYOR</i>
MAILING ADDRESS <i>Box 875</i>		PHONE NO. <i>250 788 9271</i>
CITY/TOWN <i>CHETWYND</i>	POSTAL CODE <i>V0C 1J0</i>	EMAIL (IF AVAILABLE) <i>mnichols@gochetwynd.com</i>
JURISDICTION <i>DISTRICT OF CHETWYND</i>		
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 <i>NICHOLS</i>	FIRST NAME <i>MERLIN</i>	MIDDLE NAME <i>CHARLES</i>
FINANCIAL AGENT'S MAILING ADDRESS <i>Box 875</i>		PHONE NO. <i>250 788 9271</i>
CITY/TOWN <i>CHETWYND</i>	POSTAL CODE <i>V0C 1J0</i>	EMAIL (IF AVAILABLE) <i>mnichols@gochetwynd.com</i>
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <i>2014 10 10</i>	If there were previous financial agents, complete form 4236.	

Tick if candidate was registered as a third party sponsor

*N/A* 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"/>                  |

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**LOCAL ELECTIONS CANDIDATE**



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Amendment #

CANDIDATE'S FULL NAME <i>MERLIN CHARLES NICHOLS</i>		GENERAL VOTING DAY (YYYY/MM/DD) <i>2014 11 15</i>	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <i>MAYOR</i>	
MAILING ADDRESS <i>Box 875</i>		PHONE NO. <i>250 788 9271</i>	
CITY/TOWN <i>CHETWYND</i>	POSTAL CODE <i>V0C 1W0</i>	EMAIL (IF AVAILABLE) <i>mnichols@gochetwynd.com</i>	
JURISDICTION <i>DISTRICT OF CHETWYND</i>			
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 <i>NICHOLS</i>	FIRST NAME <i>MERLIN</i>	MIDDLE NAME <i>CHARLES</i>	
FINANCIAL AGENT'S MAILING ADDRESS <i>Box 875</i>		PHONE NO. <i>250 788 9271</i>	
CITY/TOWN <i>CHETWYND.</i>	POSTAL CODE <i>V0C 1W0</i>	EMAIL (IF AVAILABLE) <i>mnichols@gochetwynd.com</i>	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <i>2014 10 10</i>	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:		<b>SEE AMENDMENT</b>	
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>MERLIN CHARLES NICHOLS</i>	
<b>Declaration:</b> 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</i> (LECFA).	
SIGNATURE OF CANDIDATE <i>[Handwritten Signature]</i>	DATE: (YYYY/MM/DD) <i>2014 12 08</i>
PRINTED NAME OF CANDIDATE <i>Merlin Nichols</i>	
SIGNATURE OF FINANCIAL AGENT <i>[Handwritten Signature]</i>	DATE: (YYYY/MM/DD) <i>2014 12 08</i>
PRINTED NAME OF FINANCIAL AGENT <i>Merlin Nichols</i>	
<b>Campaign accounts:</b>	
NAME OF SAVINGS INSTITUTION <i>No Accounts</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>No Accounts</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>No Accounts</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>No Accounts</i>	
ADDRESS	

**4222 - STATEMENT OF INCOME AND EXPENSES**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE MERLIN CHARLES NICHOLS	
Total value of campaign contributions from all sources (from box C on form 4223)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Transfers received from elector organization (from box A on form 4226)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Total other permissible deposits (from box A on form 4227)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
<b>Total Income</b> (sum of above boxes)	<input style="width: 100px; height: 20px;" type="text" value="0"/> <span style="border: 1px solid black; padding: 2px 5px; font-weight: bold;">A</span>
Election expenses (from box A on form 4229)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Transfers to elector organization (from box A on form 4230)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Total other permissible payments (from box A on form 4231)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
Amount of surplus funds disbursed (from box A on form 4234)	<input style="width: 100px; height: 20px;" type="text" value="0"/>
<b>Total Expenditures</b> (sum of above boxes)	<input style="width: 100px; height: 20px;" type="text" value="0"/> <span style="border: 1px solid black; padding: 2px 5px; font-weight: bold;">B</span>