

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME TADEUSZ KUCZYNSKI		GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/15
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) SCHOOL TRUSTEE
MAILING ADDRESS 214-33165 OLD YALE RD.		PHONE NO. 604 850 3864
CITY / TOWN ABBOTSFORD	POSTAL CODE V2S 1Z34	EMAIL (IF AVAILABLE) kuczynsk@hotmail.com
JURISDICTION ABBOTSFORD		
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 4220 <input type="checkbox"/> |
| Statement of Income and Expenses – Form 4222 <input 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



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	TADEUSZ KUCZYNSKI
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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 Kuczynski	DATE: (YYYY/MM/DD)
PRINTED NAME OF CANDIDATE KUCZYNSKI	

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

Campaign accounts:

NAME OF SAVINGS INSTITUTION	
ADDRESS	

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

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

TADEUSZ KUCZYNSKI

All Contributions

Individuals		<input type="text" value="0"/>
Corporations		<input type="text" value="0"/>
Unincorporated Business/Commercial Organizations		<input type="text" value="0"/>
Trade Unions		<input type="text" value="0"/>
Non-profit Organizations		<input type="text" value="0"/>
Other Identifiable Contributors		<input type="text" value="0"/>
Total	\$	<input type="text" value="0"/> 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 #

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE TADEUSZ KUCZYNSKI

PAGE OF

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

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**

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 2em; font-family: cursive; text-align: center;">TADEUSZ KUCZYNSKI</div>	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE KUCZYMSKI PAGE OF

Table with 4 columns: DATE OF TRANSFER (YYYY/MM/DD), BALLOT NAME OF ELECTOR ORGANIZATION*, DESCRIPTION (IF NON-MONETARY), VALUE OF TRANSFER. The table contains 15 empty rows.

*Also include legal name if different than ballot name.

TOTAL A NA

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE PLEASE PRINT IN BLOCK LETTERS



NAME OF CANDIDATE TADEUSZ KUCZYNSKI PAGE [] OF []

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

- * TYPE: I - Interest D - Dividends of shares paid by credit union S - Surplus funds from previous election returned by jurisdiction F - Fundraising income not reported as a campaign contribution O - Other (describe)

TOTAL A NA

This form is available for public inspection. ORIGINAL - ELECTIONS BC PLEASE KEEP A COPY FOR YOUR RECORDS

This information is collected to administer the Local Elections Campaign Financing Act. Questions? Contact: Privacy Officer, Elections BC 1-800-661-8683 PO Box 9276 Stn Prov Govt, Victoria BC V8W 9J8

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE TADEUSZ KUCZYNSKI	PAGE <input style="width: 20px;" type="text"/>
	OF <input style="width: 20px;" type="text"/>

DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT na
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Income reported as campaign contributions

	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				
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				

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE **TADEUSZ KUCZYNSKI**

	Column A Election Expenses	Column B Election Proceedings Period Expenses
ADVERTISING		
Brochures, pamphlets and flyers	<input type="text" value="0"/>	<input type="text" value="0"/>
Internet	<input type="text" value="0"/>	<input type="text" value="0"/>
Newspaper, magazine, journal	<input type="text" value="0"/>	<input type="text" value="0"/>
Radio	<input type="text" value="0"/>	<input type="text" value="0"/>
Signs and billboards	<input type="text" value="0"/>	<input type="text" value="0"/>
Television	<input type="text" value="0"/>	<input type="text" value="0"/>
Other advertising	<input type="text" value="0"/>	<input type="text" value="0"/>
CAMPAIGN ADMINISTRATION		
Salaries and wages	<input type="text" value="0"/>	<input type="text" value="0"/>
Rent, insurance and utilities	<input type="text" value="0"/>	<input type="text" value="0"/>
Courier and postage	<input type="text" value="0"/>	<input type="text" value="0"/>
Furniture and equipment	<input type="text" value="0"/>	<input type="text" value="0"/>
Office supplies	<input type="text" value="0"/>	<input type="text" value="0"/>
Professional services	<input type="text" value="0"/>	<input type="text" value="0"/>
Other campaign administration expenses	<input type="text" value="0"/>	<input type="text" value="0"/>
Conventions and meetings	<input type="text" value="0"/>	<input type="text" value="0"/>
Other campaign related functions	<input type="text" value="0"/>	<input type="text" value="0"/>
Research and polling	<input type="text" value="0"/>	<input type="text" value="0"/>
Interest	<input type="text" value="0"/>	<input type="text" value="0"/>
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses	<input type="text" value="0"/>	<input type="text" value="0"/>
Interest on loans for election expenses	<input type="text" value="0"/>	<input type="text" value="0"/>
Legal and accounting services	<input type="text" value="0"/>	<input type="text" value="0"/>
Financial agent services	<input type="text" value="0"/>	<input type="text" value="0"/>
Other expenses (describe)	<input type="text"/>	<input type="text"/>
Total Expenses	A <input type="text" value="0"/>	B <input type="text" value="0"/>

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.

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	PAGE	
TADEUSZ KUCZYNSKI		
	OF	

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER

TOTAL	A	NA
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*Also include legal name if different than ballot name.

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE TADEUSZ KUCZYNSKI	PAGE <input style="width: 20px;" type="text"/>
OF <input style="width: 20px;" type="text"/>	
DESCRIPTION OF SHARED EXPENSE	
Total value of shared election expense	<input style="width: 100px;" type="text"/> <input style="width: 30px;" type="text"/>
Candidate's portion of shared election expense*	<input style="width: 100px;" type="text"/> <input style="width: 30px;" type="text"/>
Amount paid directly to supplier (if applicable)	<input style="width: 100px;" type="text"/> <input style="width: 30px;" type="text"/>
Amount of reimbursements given to other candidate(s)	<input style="width: 100px;" type="text"/> <input style="width: 30px;" type="text"/>
Amount of reimbursements received from other candidates	<input style="width: 100px;" type="text"/> <input style="width: 30px;" type="text"/>

*Note: Remember to include your portion of the shared expense as an election expense on form 4229 - Summary of Election Expenses.

Full names of other candidates with whom the expense was shared:

LAST NAME	FIRST NAME	MIDDLE NAME

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



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

TADEUSZ KUCZYNSKI

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.

4234 - DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

TADEUSZ KUCZYNSKI

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

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE TADEUSZ KUCZYNSKI		
Free advertising provided by jurisdiction		
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
?	ABBOTSFORD	SHAW TV

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



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NAME OF CANDIDATE TADEUSZ KUCZYNSKI			
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)