4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



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Ameno	lment #	Ė

CANDIDATE'S FULL NAME JONATHAN Chri BALLOT NAME (IF DIFFERENT FROM ABOVE) DONATHON MAILING ADDRESS H214 - 1180 fort CITY/TOWN	stopher oll st.	Carroll POSTAL CODE V8V 3K8	GENERAL VOTING DAY (YYYY/MM/DD) 2014/11/18 OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCY OF PHONE NO. 778-677-5399 EMAIL (IF AVAILABLE) jonalhan. carroll. jc @ gmail.co.
JURISDICTION / / /	N (IF APPLICABLE)	CABLE)	
FINANCIAL AGENT'S LAST NAME F	IRST 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 ther		ial agents, complete form 4236.
Tick if candidate was registered as a third pa	arty sponsor	Tick if candidate	acted as a campaign organizer
This disclosure statement includes the following for	orms:		
Declarations and Campaign Accounts -	- Form 4221 🗹	Summa	ary of Election Expenses - Form 4229
Statement of Income and Expenses -	- Form 4222 📝	Transfers Giver	n to Elector Organization - Form 4230
Summary of Campaign Contributions by Class -	- Form 4223 🗹	Othe	er Permissible Payments – Form 4231
Significant Contributors (\$100 or more) -	- Form 4224 🚺	s	hared Election Expense - Form 4232
Prohibited Campaign Contributions -	- Form 4225 🗾	Transfers Between Ca	ndidate's Own Accounts - Form 4233
Transfers Received from Elector Organization -	- Form 4226 🗾	Disburs	ement of Surplus Funds - Form 4234
Other Permissible Deposits -	- Form 4227 🗾	Free Adv	ertising from Jurisdiction - Form 4235
Fundraising Function Ticket Sales	- Form 4228 🚺	Pr	revious Financial Agents - Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Jonathan Carroll	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and ac required under the <i>Local Elections Campaign Financing Act</i> (LECFA).	curately discloses the information
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD) 2015/02/04
PRINTED NAME OF CANDIDATE	2010702701
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
PRINTED NAME OF FINANCIAL AGENT	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION ROYAL Bank of Canada	
Royal Bank of Canada ADDRESS 1079 Douglas St. Victoria B.C. V8	W 2C5
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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aign contributions from all sources (from box C on form 4223)
received from elector organization (from box A on form 4226)
Total other permissible deposits (from box A on form 4227)
own accounts in other jurisdictions (from box A on form 4233)
Total Income (sum of above boxes)
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)
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)

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	
L	
	All Contributions
Individuals	500 550
Corporations	,
Unincorporated Business/Commercial Organizations	-
Trade Unions	+
Non-profit Organizations	
Other Identifiable Contributors	
Total	\$ 550 A
Anonymous contributions	\$ B
Total contributions (A + B)	\$ 300550 C
Total significant contributions (must equal box A on all forms 4224)	\$ 400
Total contributions of less than \$100	\$ 150
Number of contributors who gave less than \$100	# # 3
Number of anonymous contributors	# 🔿

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE				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
2014/10/01	Charlotte Gall		1	\$400
		·		•
• .		- · ·		-
			-	
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NEEDED, ATTACH A CLASS OF CONTRIBL 1 – INDIVIDUAL, 2 – C	DDITIONAL FORMS JTOR: ORPORATION, 3 – UNINCORPORATED BUSINESS/CO - NON-PROFIT ORGANIZATION, 6 – OTHER IDENTIFIA	MMERCIAL ORGANIZATION CONTRIBL	TOTAL ITIONS	400

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

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.

	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	592 38 64288	592-88 64Z
Internet		
Newspaper, magazine, journal		
Radio		
Signs and billboards		
Television		
Other advertising		
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		
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		<u> </u>
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
other expenses (describe)		
Total Expenses	A 547.88	в 597.89

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

PLEAS	E PRINT IN BLOCK LETTERS		
me of candidate Jonathan	Carroll		PAGE
e e e	and a supply of the same invitation		
insters between candidates	s own campaign accounts in same jurisdiction		
	PURPOSE		AMOUNT
			\$50.00
Help pay to	ryers	School	
/			
1.00			
A 10 min			
ınsfers from candidate's ow	n campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
(1111/111115/00)			
		<u></u>	
		TOTAL	Α
	campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
		TOTAL	B
		TOTAL	1

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE			
	Balance remaining in campaign account(s) after payment of all expenses	5.32 A	
	Total amount of campaign contributions from candidate	50 B	
Amount reimbursed to can	Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign		
	Date of reimbursement to candidate (YYYY/MM/DD)	2015/02/06	
	Amount of remaining surplus funds (after any reimbursement under box C)	5.32 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 i	s less than \$500 provide details of how it was disbursed.		
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT	