4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT **LOCAL ELECTIONS CANDIDATE**



PLEASE PRINT IN BLOCK LETTERS	Amendment #
CANDIDATE'S FULL NAME	GENERAL VOTING DAY (YYYY/MM/DD)
Kobert Dimpsor	2014/11/15
BALLOT NAME (IF DIFFERENT FROM ABOVE)	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
Bob Simpson	MATOR
MAILING ADDRESS Phillips Rd. W.	PHONE NO. 250-255-1433
	V2T A 74 DSing 76 @ live Ca
<u> </u>	V2J 474 bsim 56@ live.ca
JURISDICTION Municipality of Q	uesne)
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICA)	
Municipa lity of	Exuesnel
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	-
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
FINANCIAL AGENT'S LAST NAME FIRSI NAME	MIDDLE NAME
SIMPSON ROBERT	
FINANCIAL AGENT'S MAILING ADDRESS	· PHONE NO.
127 Phillips Rd. N.	250-255-1433
1 / \ .	OSTAL CODE EMAIL (IF AVAILABLE)
	125 444 bsim 56@ live.ca
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) If there w	vere 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 X	Summary of Election Expenses – Form 4229
Statement of Income and Expenses - Form 4222 X	Transfers Given to Elector Organization - Form 4230
Summary of Campaign Contributions by Class - Form 4223	Other Permissible Payments - Form 4231
Significant Contributors (\$100 or more) - Form 4224	Shared Election Expense - Form 4232
Prohibited Campaign Contributions - Form 4225 T	ransfers Between Candidate's Own Accounts - Form 4233
Transfers Received from Elector Organization - Form 4226	Disbursement of Surplus Funds - Form 4234
Other Permissible Deposits - Form 4227	Free Advertising from Jurisdiction Form 4235
Fundraising Function Ticket Sales - Form 4228	Previous Financial Agents - Form 4236

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

SEE AMENDMENT

Amendment #

CANDIDATE'S FULL NAME	GENERAL VOTING DAY (YYYY/MM/DD)
Mobert Dimpse	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
BALLOT NAME (IF DIFFERENT FROM ABOVE)	MATOR
MAILING ADDRESS ()	PHONE NO.
127 Phillips Kd. N.	250-255-1433
CITY/TOWN	POSTAL CODE EMAIL (IF AVAILABLE)
<u> </u>	1/25/ 4/4/ bsim 56@ live.ca
JURISDICTION	
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLA	CABLE)
Municipa Lity of	- Cyliesnel
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
FOUNDATION ASSESSMENT FOR THE PROPERTY OF THE	/
FINANCIAL AGENT'S LAST NAME FIRST NAME SIMPSON FOR THE STANDARD FOR THE	MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS	PHONE NO.
127 thillips Kd. N	. Z50-255-1433
CITY/TOWN	POSTAL CODE EMAIL (IF AVAILABLE) V2J 444 DSIM 56@ LIVE. Ca
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 X	Summary of Election Expenses - Form 4229
Statement of Income and Expenses – Form 4222 X	Transfers Given to Elector Organization - Form 4230
Summary of Campaign Contributions by Class – Form 4223	Other Permissible Payments - Form 4231
Significant Contributors (\$100 or more) - Form 4224	Shared Election Expense - Form 4232
Prohibited Campaign Contributions – Form 4225	Transfers Between Candidate's Own Accounts - Form 4233
Transfers Received from Elector Organization – Form 4226	Disbursement of Surplus Funds - Form 4234
Other Permissible Deposits - Form 4227	Free Advertising from Jurisdiction - Form 4235
Fundraising Function Ticket Sales - Form 4228	Previous Financial Agents - Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	
Mobert Jimpson	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and ac	ccurately discloses the information
required under the Local Elections Campaign Financing Act (LECFA).	
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD)
	2015/02/09
PRINTED NAME OF CANDIDATE TOSET SIMOSON	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD) 2015/02/09
PRINTED NAME OF FINANCIAL AGENT ROBERT SIMPSON	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION Integris Credit Union	Quesnel)
ADDRESS. 1532 6th Ave, Prince George,	V2L 5B5
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE ROBERT SIMPSON		
Total value of campaign contributions from all sources (from box C on form 4223)	\$7,327.35	
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)	*7,327.35	A
		7
Election expenses (from box A on form 4229)	*7, 327. ³⁵	
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)	\$ 7,327.35	В

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE ROBERT SIMPSON	
Individuals	All Contributions # 7, 377, 35
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	
Total	\$ *7,327.35 A
Anonymous contributions	\$ B
Total contributions (A + B)	\$ #7,327.35 c
Total significant contributions (must equal box A on all forms 4224)	s # 7, 327. ³⁵
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



NAME OF CANDIDATE ROBER L SIMPSON			PAGE	
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
2014/10/14	Robert Simpson		ſ	[#] 500.∞
2014/10/14	Robert Simpson			# 4,500.∞
2014/11/06	Robert Simpson		Į.	#2,000.00
2014/11/20	Robert Simpson		١	\$ 327. 35
···				
				- And Andrew
,				
			-	
NEEDED, ATTACH ADI CLASS OF CONTRIBUT 1 — INDIVIDUAL, 2 — COI	DITIONAL FORMS OR: RPORÁTION, 3 UNINCORPORATED BUSINESS/CON	MERCIAL ORGANIZATION CONTRIBU	OTAL A	#7,327.35

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Robert Simp	2500		
NOSER OTHER			
	Column A	Column B	
ADVERTISING	Election Expenses	Election Proceedings Period Expenses	
Brochures, pamphiets and flyers	#2,134,23	2,134,23	
Internet	# 1.020.67	1.020.67	
Newspaper, magazine, journal	\$ 1,860.77	1.860.77	
Radio	# 477.75	474.75	
Signs and billboards	¥1568.∞	1,568.00	
Television			
Other advertising	# 136.57	136.57	
CAMPAIGN ADMINISTRATION			
Salaries and wages			
Rent, insurance and utilities			
Courier and postage	4129.36	129.36	
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			
Interest on loans for election expenses			
Legal and accounting services			
Financial agent services			
Other expenses (describe)			
Total Expenses	A \$7,327.35	в 7,327.35	
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 is from September 30, 2014 to November 15, 2014.	edings period.		

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

SEE AMENDMENT

NAME OF CANDIDATE	Robert Simp	λολ	
	NOSENC OTTA		Calvan B
		Column A Election	Column B
ADVERTISING		Expenses	Election Proceedings Period Expenses
	Brochures, pamphlets and flyers	#2,134.23	
	Internet	# 1,020.67	
	Newspaper, magazine, journal	* 1,860.77	
	Radio	# 477.75	
	Signs and billboards	*156.8.00	
	Television		
	Other advertising	136.57	
CAMPAIGN ADMINISTRATION			· · · · · · · · · · · · · · · · · · ·
	Salaries and wages		
	Rent, insurance and utilities		
	Courier and postage	 \$129.36	
	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		
	Interest on loans for election expenses		<u> </u>
	Legal and accounting services		
	Financial agent services		
Other expenses (describe)			
		# 1 0 = 2 35	
	Total Expenses	A #7,327,35	В
Column A - Report the value of all election expense The campaign period is from January 1, 2014 to Nov	es for goods and services used in the campaign perivember 15, 2014.	iod.	
Column B - Report the value of all election expense The election proceedings period is from September 3		edings period.	

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	Robert Simpson	
	*	
	Balance remaining in campaign account(s) after payment of all expenses	—— A
	Total amount of campaign contributions from candidate	#7,327.35 B
Amount reimbursed to car	ndidate from campaign account for the candidate's contributions to their campaign	<i>→</i> 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 I	o 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
	. : 	