4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



Amendment # _____

BORDTHY ANNE BECC	GENERAL YOTING DAY (YYYY/MM/DD)
BALLOT NAME (IF DIFFERENT FROM ABOVE)	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
A LANGUAGE CONTRACTOR OF THE C	COUNCILIOR PHONE NO.
1406 110 W 4th St.	778-2514303
NORTH VANCOUVER	POSTAL CODE EMAIL (IF AVAILABLE)
JURISDICTION	17/1/ 27: - Coccini/ 1/ /acc (costac)
NORTH VANOUIFRCITE	
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLI	CABLE)
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
DALLOT MANIE OF ENDOAGING SECUTOR ORGANIZATION (IF APPLICABLE)	
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME
FINANGIAL AGENT'S MAILING ADDRESS	PHONE NO.
1406 110 W 4 ST	
CITY/TOWN	POSTAL CODE EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYYMM/DD)	17M 13+13 dop Thy 2 bell@ 8/120
	e 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	Summary of Election Expenses - Form 4229
Statement of Income and Expenses - Form 4222	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 DOROTHY ANNE BECC	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accrequired under the Local Elections Campaign Financing Act (LECFA).	curately discloses the information
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD)
	2015/02/02.
PRINTED NAME OF CANDIDATE DOROTHY ANNE DUI	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
PRINTERWAME OF FINANCIAL AGENT DOROTHY HANDE DE (
Campaign accounts:	
NAME OF SAVINGS INSTITUTION	
ADDRESS 1290 MOVINE Drive.	
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 DOROVAY - ANNE BELL	
Total value of campaign contributions from all sources (from box C on form 4223)	444/6:33-44
Transfers received from elector organization (from box A on form 4226)	D
Total other permissible deposits (from box A on form 4227)	D
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	٥
Total Income (sum of above boxes)	4446-33. A
	477100
Election expenses (from box A on form 4229)	4446.53
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)	1.50
Total Expenditures (sum of above boxes)	4447083 B

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE DOROVAY ANNE BELL	
Total value of campaign contributions from all sources (from box C on form 4223)	4446.33
Transfers received from elector organization (from box A on form 4226)	D .
Total other permissible deposits (from box A on form 4227)	D
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	Ò
Total Income (sum of above boxes)	4446-33 A
Election expenses (from box A on form 4229)	4446-53
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)	1.50
Total Expenditures (sum of above boxes)	4447.83 B

SEE AMENDMENT

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME-GE-CANDIDATE ()	4		
DOROTHY ANNE Bell			
	All Occupations		
individuals	All Contributions	-4097,	82
Corporations	350		00
Unincorporated Business/Commercial Organizations	300		
Trade Unions			
Non-profit Organizations			
Other Identifiable Contributors			
Total	\$ 4446.33	A	
	4447.83		
Anonymous contributions	\$	В	
Total contributions (A + B)	\$ 4441.33	С	
	4447.83		
Total significant contributions (must equal box A on all forms 4224)	\$ 4446.33		
	4447.82		
Total contributions of less than \$100	\$		
Number of contributors who gave less than \$100	#		
Number of anonymous contributors	#		

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE DO ANNE BELL	
. Individuals	All Contributions
	401015
Corporations	350
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	
Total	\$ 4446.33A
Anonymous contributions	\$ B
Total contributions (A + B)	s 4446-33 c
Total significant contributions (must equal box A on all forms 4224)	\$ 4446.33
Total contributions of less than \$100	\$
Number of contributors who gave less than \$100	# 0
Number of anonymous contributors	#

SEE AMENDIVIENT

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



NAME OF CANDIDATE				PAGE
Dopo	thy HUNC Bell			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 Od 3x	Rusty Gule Neighbo House David TAD	Pring N. UAN	2	200
0014 Oct 30	BEIND RICHLUGER	pring N. UAN uger 86 Semisch Au N. UMN	て	150
2014 NOU 1	DAVIN Velinho		l	125
2014 NOU (0			į	100
2014 NOU 10	DAVID GOWMAN. Don FIORVENTO		(100
657-2014-	DOROTHY-PUNE BO	2(1	1 -	3772.83
			·	
				·
				1
IF NEEDED, ATTACH A *CLASS OF CONTRIBI 1 – INDIVIDUAL, 2 – C	UTOR: :ORPORATION. 3 – UNINCORPORATED BUSINESS/COI	MMERCIAL ORGANIZATION CONTRIBL	TOTAL ITIONS	A 107500
4 – TRADE UNION, 5 -	- NON-PROFIT ORGANIZATION, 6 OTHER IDENTIFIAN	BLE CONTRIBUTOR	- <i>L</i>	146.33

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



NAME OF CANDIDATE				PAGE
Dopo	thy HUNC Bell			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
O4 3 ₀	Rusty Gule Neighbo House Shunde David TAP 3 A Jon Haging Ried BRIND Riedlunger	pring N. UAN ujer 86 Semisch Au N. UNN	2	2,00
OCT 30	BRIND Richlunger	uger 86 Semisch A4	7,	150
NOU 1	DAVIA Velinho		4	125
NOU 10	DAVID GOWANDW.		ί	100
NSU 10	Davip Gowandu. Don Fiorvento		((00)
Color	DOROTHY-PUNE BE			3771.33
				·
				A +07500
				144/2-33

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE DOROTHY ANNE BELL		
	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	2027.20	699.40
Internet	25-01	
Newspaper, magazine, journal	7	
Radio		
Signs and billboards	184-22	184-22
Television	10700	
Other advertising	455.77	35.54
CAMPAIGN ADMINISTRATION		
Salaries and wages		
Rent, insurance and utilities		
Courier and postage	17/9 55	
Furniture and equipment	111000	
Office supplies	34.59	28-87
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 444/6-33	B 948.07
Column A - Report the value of all election expenses for goods and services used in the campaign per The campaign period is from January 1, 2014 to November 15, 2014.	iod.	. ,
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.	

41.

LOCAL ELECTIONS CANDIDATE





SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE NAME OF CANDIDATE DESCRIPTION OF SHARED EXPENSE Total value of shared election expense Candidate's portion of shared election expense* Amount paid directly to supplier (if applicable) Amount of reimbursements given to other candidate(s) Amount of reimbursements received from other candidates *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: MIDDLE NAME LAST NAME FIRST NAME

4232 - SHARED ELECTION EXPENSE LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS



NAME OF CANDIDATE DESCRIPTION OF SHARED EXPENSE CO.	e Bell	PAGE OF 3
Election Sig	NS	
) Total value of shared	d election expense 368.45
	Candidate's portion of shared	election expense* 184 - 23
	Amount paid directly to sup	oplier (if applicable)
	Amount of reimbursements given to	other candidate(s)
	Amount of reimbursements received fro	m other candidates William
*Note: Remember to include your port	tion of the shared expense as an electio	n expense on form 4229 - Summary of
Election Expenses.		
Full names of other candidates with w	rhom the expense was shared:	
LAST NAME	FIRST NAME	MIDDLE NAME
wittism John Bell	William	John.
	· / · · · · · · · · · · · · · · · · · ·	

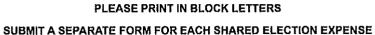
4232 - SHARED ELECTION EXPENSE LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE DOPOTHY	une Bell	PAGE OF	7 4
DESCRIPTION OF SHARED EXPENSE			
	Total value of shared	d election expense 4054	.40
	Candidate's portion of shared	election expense*	.20
	Amount paid directly to sup	oplier (if applicable)	1.46 2029.20
	Amount of reimbursements given to	other candidate(s)	
	Amount of reimbursements received from	m other candidates	
*Note: Remember to include your port Election Expenses.	ion of the shared expense as an election	n expense on form 4229 - Summa	ry of
Full names of other candidates with w	hom the expense was shared:		
		MIDDLE MANG	
LAST NAME Williams Bell	FIRST NAME SOLL WILLIAM	MIDDLE NAME	
	FIRST NAME		

LOCAL ELECTIONS CANDIDATE





NAME OF CANDIDATE DOPOTHY	NNe Bell		PAGE 7
DESCRIPTION OF SHARED EXPENSE PROCLEMES			
	Total value of shared	election expense	4054.40
	Candidate's portion of shared	election expense*	2027.20
	Amount paid directly to sup	plier (if applicable)	4054.40
	Amount of reimbursements given to	other candidate(s)	
	Amount of reimbursements received from	n other candidates	
*Note: Remember to include your por	tion of the shared expense as an election	expense on form	4229 - Summary of
Election Expenses.			
miodion Exponoss.			
Full names of other candidates with w	whom the expense was shared:		
	whom the expense was shared:	мюы	LE NAME
Full names of other candidates with w			
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		
Full names of other candidates with w	FIRST NAME		

LOCAL ELECTIONS CANDIDATE





NAME OF CANDIDATE DOROTHY AN	ine Boll.	PAGE OF 3-	
DESCRIPTION OF SHARED EXPENSE	/ Interver		
	Total value of share	d election expense 9//54	
	Candidate's portion of shared	election expense*	
Amount paid directly to supplier (if applicable)			
	Amount of reimbursements given to	o other candidate(s)	
	Amount of reimbursements received fro	m other candidates	
*Note: Remember to include your port Election Expenses. Full names of other candidates with w	tion of the shared expense as an election of the shared expense was shared:	n expense on form 4229 - Summary of	
LAST NAME	FIRST NAME	MIDDLE NAME	
BELL	WILLIAM	JOHN	

LOCAL ELECTIONS CANDIDATE





$1 \cdot 1 \cdot$	ine Boll.	PAGE
Boto Juy Tin	100 1	of 3
DESCRIPTION OF SHARED EXPENSE	10-+	- /
Face 200K	/ INTERNER	
·	/	
	Total value of si	hared election expense
	Candidate's portion of sh	ared election expense*
	Amount paid directly t	to supplier (if applicable)
	Amount of reimbursements giv	ren to other candidate(s)
	Amount of reimbursements receive	ed from other candidates
*Note: Remember to include your port	tion of the shared expense as an ele	ection expense on form 4229 - Summary of
Election Expenses.		
Full names of other candidates with w	whom the expense was shared:	
LAST NAME	FIRST NAME	MIDDLE NAME
		1
<u> </u>	1/	

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE DOROTHY ANNE BELL	·		PAGE 4
DESCRIPTION OF SHARED EXPENSE INTERNET			
	Total valu	ue of shared election expense	50.02
	Candidate's portion	n of shared election expense*	25.01
	Amount paid di	irectly to supplier (if applicable)	25.01
	Amount of reimburseme	ents given to other candidate(s)	
	Amount of reimbursements r	received from other candidates	
Election Expenses.	your portion of the shared expense as		9 - Summary of
LAST NAME	FIRST NAME	MIDDLE N	AME
BELL	WILLIAM	JOHN	

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



DOROTHY ANNE BE	ELL	
·		
	Balance remaining in campaign account(s) after payment of all expenses	1.50 A
	Total amount of campaign contributions from candidate	3,772.83 B
Amount reimbursed to o	candidate from campaign account for the candidate's contributions to their campaign	1.50 C
	Date of reimbursement to candidate (YYYY/MM/DD)	2015/02/06
	Amount of remaining surplus funds (after any reimbursement under box C)	D
If the amount in Box	x 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.	
If the amount in Box DATE (YYYY/MM/DD)	D is less than \$500 provide details of how it was disbursed. DESCRIPTION	AMOUNT
		AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT
	DESCRIPTION	AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT
	DESCRIPTION OVI (10) Library (1)	AMOUNT