

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME JOY KRISTIN THORKELOSON		GENERAL VOTING DAY (YYYY/MM/DD) 2014 Nov 15
BALLOT NAME (IF DIFFERENT FROM ABOVE) JOY THORKELOSON		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR
MAILING ADDRESS 935 - 6th AVENUE EAST		PHONE NO. 250 624 5333
CITY / TOWN PRINCE RUPERT	POSTAL CODE V8J 1X7	EMAIL (IF AVAILABLE) Joy.Thorkelson@prince.rupert.ca

JURISDICTION CITY OF PRINCE RUPERT
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 THORKELOSON	FIRST NAME Joy	MIDDLE NAME KRISTIN
FINANCIAL AGENT'S MAILING ADDRESS 935 - 6th Avenue East		PHONE NO.
CITY / TOWN PRINCE RUPERT	POSTAL CODE V8J 1X7	EMAIL (IF AVAILABLE) Joy.Thorkelson@prince.rupert.ca
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2014/October/10	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 checked="" type="checkbox"/> | Summary of Election Expenses -- Form 4229 <input checked="" type="checkbox"/> |
| Statement of Income and Expenses -- Form 4222 <input checked="" type="checkbox"/> | Transfers Given to Elector Organization -- Form 4230 <input checked="" type="checkbox"/> |
| Summary of Campaign Contributions by Class -- Form 4223 <input checked="" type="checkbox"/> | Other Permissible Payments -- Form 4231 <input checked="" type="checkbox"/> |
| Significant Contributors (\$100 or more) -- Form 4224 <input checked="" type="checkbox"/> | Shared Election Expense -- Form 4232 <input checked="" type="checkbox"/> |
| Prohibited Campaign Contributions -- Form 4225 <input checked="" type="checkbox"/> | Transfers Between Candidate's Own Accounts -- Form 4233 <input checked="" type="checkbox"/> |
| Transfers Received from Elector Organization -- Form 4226 <input checked="" type="checkbox"/> | Disbursement of Surplus Funds -- Form 4234 <input checked="" type="checkbox"/> |
| Other Permissible Deposits -- Form 4227 <input checked="" type="checkbox"/> | Free Advertising from Jurisdiction -- Form 4235 <input checked="" type="checkbox"/> |
| Fundraising Function Ticket Sales -- Form 4228 <input checked="" type="checkbox"/> | Previous Financial Agents -- Form 4236 <input checked="" type="checkbox"/> |

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

Joy KRISTIN THORKELOSON

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

DATE: (YYYY/MM/DD)

Joy K Thorke

2015/January/28

PRINTED NAME OF CANDIDATE

Joy KRISTIN THORKELOSON

SIGNATURE OF FINANCIAL AGENT

DATE: (YYYY/MM/DD)

Joy K Thorke

2015/January/28

PRINTED NAME OF FINANCIAL AGENT

Joy Kristin Thorke

Campaign accounts:

NAME OF SAVINGS INSTITUTION

NORTHERN SAVINGS CREDIT UNION

ADDRESS

138 - 3rd Avenue West PRINCE RUPERT BC. V8J 1K8

NAME OF SAVINGS INSTITUTION

ADDRESS

NAME OF SAVINGS INSTITUTION

ADDRESS

NAME OF SAVINGS INSTITUTION

ADDRESS

4222 - STATEMENT OF INCOME AND EXPENSES
LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE JOY THORKELSON

Total value of campaign contributions from all sources (from box C on form 4223)	<u>2,472.47</u> 3,110.87	
Transfers received from elector organization (from box A on form 4226)	<u>0</u>	
Total other permissible deposits (from box A on form 4227)	<u>0</u>	
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	<u>0</u>	
Total Income (sum of above boxes)	3,110.87 <u>2,472.47</u>	A
Election expenses (from box A on form 4229)	<u>2,555.65</u>	
Transfers to elector organization (from box A on form 4230)	<u>0</u>	
Total other permissible payments (from box A on form 4231)	<u>27.00</u>	
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	<u>0</u>	
Amount of surplus funds disbursed (from box A on form 4234)	<u>528.22</u>	
Total Expenditures (sum of above boxes)	<u>3,110.87</u>	B

4222 - STATEMENT OF INCOME AND EXPENSES

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

Total value of campaign contributions from all sources (from box C on form 4223)	3,110.87	
Transfers received from elector organization (from box A on form 4226)	0	
Total other permissible deposits (from box A on form 4227)	0	
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	0	
Total Income (sum of above boxes)	3,110.87	A
Election expenses (from box A on form 4229)	2,555.65	
Transfers to elector organization (from box A on form 4230)	0	
Total other permissible payments (from box A on form 4231)	27.00	
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	0	
Amount of surplus funds disbursed (from box A on form 4234)	528.22	
Total Expenditures (sum of above boxes)	3,110.87	B

SEE AMENDMENT

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Joy THORKELOSON

		All Contributions	
Individuals		<u>3,110.87</u>	24 72.47
Corporations		0	
Unincorporated Business/Commercial Organizations		0	
Trade Unions		0	
Non-profit Organizations		0	
Other Identifiable Contributors		0	
Total	\$	<u>3,110.87</u>	A 24 72.47
Anonymous contributions	\$	0	B
Total contributions (A + B)	\$	<u>3,110.87</u>	C 24 72.47
Total significant contributions (must equal box A on all forms 4224)	\$	<u>3,110.87</u>	24 72.47
Total contributions of less than \$100	\$	0	

Number of contributors who gave less than \$100 # 0

Number of anonymous contributors # 0

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

		All Contributions	
	Individuals	3,110.87	
	Corporations	0	
	Unincorporated Business/Commercial Organizations	0	
	Trade Unions	0	
	Non-profit Organizations	0	
	Other Identifiable Contributors	0	
	Total	\$ 3,110.87	A
	Anonymous contributions	\$ 0	B
	Total contributions (A + B)	\$ 3,110.87	C
	Total significant contributions (must equal box A on all forms 4224)	\$ 3,110.87	
	Total contributions of less than \$100	\$ 0	
	Number of contributors who gave less than \$100	# 0	
	Number of anonymous contributors	# 0	

SEE AMENDMENT

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE: Joy KRISTIN THORKELSON PAGE 1 OF 1

Table with 5 columns: DATE OF CONTRIBUTION (YYYY/MM/DD), FULL NAME OF CONTRIBUTOR, ADDRESS OF CONTRIBUTOR, CLASS*, VALUE OF CONTRIBUTION. Rows include contributions from Joy Thorkelson (Self) for 2014/Oct/11 (2,000.00), 2014/Oct/17 (638.40), and 2014/Nov/07 (472.47). Includes handwritten calculations for the Oct 17 entry: 38 signs x \$15.00 x 12% GST/PST = 638.40.

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 3,110.87 2472.47

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE: Joy KRISTIN THORKELSON 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/Oct/11	Joy Thorkelson (Self)		1	2,000. ⁰⁰
2014/Oct/17	Joy Thorkelson Value of Signs used from 2011 Campaign		1	638. ⁴⁰
	38 signs x \$15.00 x 12% GST/PST = 638. ⁴⁰			
2014/Nov/07	Joy Thorkelson (Self)		1	472. ⁴⁷

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 3,110.87**

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE <i>Joy Kristin Thorkelson</i>	PAGE <u>1</u> OF <u>1</u>
INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received. Attach additional forms if necessary. <i>NONE RECEIVED</i>	

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 ^{KRISTIN}
JOY S THORKELSON

PAGE 1
OF 1

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
<u>NONE RECEIVED</u>			

*Also include legal name if different than ballot name.

TOTAL A 

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS



NAME OF CANDIDATE

Joy KRISTIN THORKELOW

PAGE 1

OF 1

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		NONE	
TOTAL		A	

* 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)

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <i>Joy KRISTIN THORIKELSON</i>	PAGE <i>1</i>
	OF <i>1</i>

DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT
----------------------------	----------------------------------

Income reported as campaign contributions

No Fundraising Function Ticket Sales

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations				<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>
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				<input type="checkbox"/>

4229 - SUMMARY OF ELECTION EXPENSES
LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE JOY THORKELSON

	Column A Election Expenses	Column B Election Proceedings Period Expenses
ADVERTISING		
Brochures, pamphlets and flyers	544.32	544.32
Internet	0	
Newspaper, magazine, journal	125.47	125.47
Radio		
Signs and billboards	1,541.40	1,541.40
Television		
Other advertising		
CAMPAIGN ADMINISTRATION		
Salaries and wages		
Rent, insurance and utilities	163.46	163.46
Courier and postage	141.00	141.00
Furniture and equipment		
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings	40.00	40.00
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 2555.65 B 2555.65

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.

4229 - SUMMARY OF ELECTION EXPENSES
LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

ADVERTISING

	Column A Election Expenses	Column B Election Proceedings Period Expenses
Brochures, pamphlets and flyers	544.32	544.32
Internet	0	
Newspaper, magazine, journal	125.47	125.47
Radio		
Signs and billboards	1,541.40	1,541.40
Television		
Other advertising		

CAMPAIGN ADMINISTRATION

Salaries and wages		
Rent, insurance and utilities	163.46	163.46
Courier and postage	141.00	141.00
Furniture and equipment		
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings	40.00	40.00
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 2555.65 B 2555.65

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.

SEE AMENDMENT

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE **JOY KRISTIN THORKEELSON** PAGE 1
 OF 1

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
	<i>No Elector Organization</i>		

*Also include legal name if different than ballot name.

TOTAL **A**

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE: *Joy Kristin Thorckelson* PAGE *1*
 OF *1*

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
<i>2014/Oct/31</i>	<i>B</i>	<i>Monthly Service Fee Northern Savings C/u.</i>	<i>9.⁰⁰</i>
<i>2014/Nov/30</i>	<i>B</i>	<i>Monthly Service Fee Northern Savings C/u.</i>	<i>9.⁰⁰</i>
<i>2014/Dec/31</i>	<i>B</i>	<i>Monthly Service Fee Northern Savings C/u</i>	<i>9.⁰⁰</i>

*TYPE:
 B - Bank fees
 E - Intended election expense that was not used
 F - Payments made for fundraising purposes
 N - Nomination deposit
 O - Other (describe)

TOTAL **A** *27.⁰⁰*

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS



SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE
Joy KRISTIN THORKEELSON

PAGE *1*
OF *1*

DESCRIPTION OF SHARED EXPENSE

No shared Expenses

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:

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
Joy KRISTIN THORKELOW

PAGE *1*
 OF *1*

Transfers between candidate's own campaign accounts in same jurisdiction

PURPOSE	AMOUNT
<i>No transfers made - only 1 Account</i>	

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		<i>0</i>

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		<i>0</i>

The amounts in boxes A and B must be carried forward to form 4222.

4234 - DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE
JOY KRISTIN THORKELOW

Balance remaining in campaign account(s) after payment of all expenses 528.22 A

Total amount of campaign contributions from candidate 2,472.47 B

Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign 528.22 C

Date of reimbursement to candidate (YYYY/MM/DD) 2015/Jan/26

Amount of remaining surplus funds (after any reimbursement under box C) 0 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). N/A

If the amount in Box D is less than \$500 provide details of how it was disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
<i>2015/Jan/26</i>	<i>Balance paid to the Candidate (Self)</i>	<i>528.22</i>

4235 - FREE ADVERTISING FROM JURISDICTION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

Joy Thorkelson

Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
	N/A	

4236 - PREVIOUS FINANCIAL AGENTS
LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE <i>JOY KRISTIN THORKELOSON</i>			
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)

N/A
I was my own financial agent