4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



Amendment #

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	GENERAL VOTING DAY (YYYY/MM/DD)
CANDIDATE'S FULL NAME	2014 11 15
BALLOT NAME (IF DIFFERENT FROM ABOYE)	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
1/ 0	School PUSTEE
KRISTINE KETTER	PHONE NO.
20125-90 AVENUE	604.888.3224
CITY (TOWN POSTAL CODE	
LANGLEY ISC VIM	2NY KRISTINE KETIER @ Shaw!
JURISDICTION //	(1 15) 112
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LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
	AUDDI E MAME
FINANCIAL AGENT'S LAST NAME FIRST NAME	AUDDLE NAME
KETTER KRISTINE	PHONE NO.
FINANCIAL AGENT'S MAILING ADDRESS	604. 888. 3224
20736-90 HUENLE POSTAL COD	
CITY/TOWN VI	2N4 KRISTINE KETTER SHOW CA
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2014 110 (0)	candidate acted as a campaign organizer
Tick if candidate was registered as a third party sponsor Tick if	candidate acted as a campaign organizer
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This disclosure statement includes the following forms:	Form 4229
Declarations and Campaign Accounts - Form 4221	Summary of Election Expenses - Form 4229
	nsfers Given to Elector Organization - Form 4230
Statement of income and Expenses	
Summary of Campaign Contributions by Class - Form 4223	Other Permissible Payments - Form 4231
	Shared Election Expense - Form 4232
Significant Contributors (\$100 or more) - Form 4224	~
Prohibited Campaign Contributions - Form 4225 Transfers E	Between Candidate's Own Accounts - Form 4233
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Transfers Received from Elector Organization - Form 4226 1	Disbursement of Surplus Funds - Form 4234
	Free Advertising from Jurisdiction - Form 4235
Other Permissible Deposits - Form 4227	·
Fundraising Function Ticket Sales - Form 4228	Previous Financial Agents - Form 4236
Fundraising Function Ticket Sales - Form 4220	

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

A non-partisan Office of the Legislature

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

Amendment #

BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) LANGLES POSTAL CODE BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) LANGLES POSTAL CODE PHONE NO. BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) LONGLES LONGLES POSTAL CODE PHONE NO. BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) FINANCIAL AGENT'S LAST NAME KETTER POSTAL CODE PHONE NO. BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (F APPLICABLE) FINANCIAL AGENT'S MALING ADDRESS 2073 6-90 A USELUE FINANCIAL AGENT'S MALING ADDRESS 2073 6-90 A USELUE FINANCIAL AGENT'S MALING ADDRESS 2074 8-90 A USELUE FINANCIAL AGENT'S MALING ADDRESS 2074 8-90 A USELUE FINANCIAL AGENT'S MALING ADDRESS 2074 8-90 A USELUE FINANCIAL AGENT'S MALING ADDRESS 2074 100 CMB 200 CMB			
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Fundraising Function Ticket Sales — Form 4228 💙 Previous Financial Agents — Form 4230 💜	Fundraising Function Ticket Sales - Form 4228	Pi	revious Financial Agents - Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE KRISTINE KETTER	
1 DESTINE ROTTEC	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely a	nil accurately discloses the information
required under the Local Elections Campaign Financing Act (LECFA).	
SIGNATURE OF CANDIDATE	DATE: (YYYY(MM/DD),
KOKO	2015 02 13
PRINTED NAME OF CANDIDATE	
KDKETTER	
SIGNATURE OF FINANCIAL AGENT . / , /	DATE: (YYYY/MM/DD)
SIGNATURE OF FINANCIAL AGENT	2015 02 13
PRINTED NAME OF FINANCIAL AGENT	10000000
KDKEMER	,
Campaign accounts:	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	·
NAME OF SAVINGS INSTITUTION	,
ADDRESS	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
·	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE KRISTINE KETTER	
Total value of campaign contributions from all sources (from box C on form 4223)	4442.528
Transfers received from elector organization (from box A on form 4226)	Ø
Total other permissible deposits (from box A on form 4227)	8
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	8
Total Income (sum of above boxes)	4442.52Q A
Election expenses (from box A on form 4229)	4442.52
Transfers to elector organization (from box A on form 4230)	8
Total other permissible payments (from box A on form 4231)	. 8
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	6
Amount of surplus funds disbursed (from box A on form 4234)	8
Total Expenditures (sum of above boxes)	4442.52 B

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE KRISTINE KETTER		
Total value of campaign contributions from all sources (from box C on form 4223)	\	
Transfers received from elector organization (from box A on form 4226)	<u>\</u>	
Total other permissible deposits (from box A on form 4227)	۵	
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	8	
Total Income (sum of above boxes)	Ø	Α
Election expenses (from box A on form 4229)	4442.52	
Transfers to elector organization (from box A on form 4230)	Þ	
Total other permissible payments (from box A on form 4231)	. 8	•
Transfers to candidate's own accounts in other urisdictions (from box B on form 4233)	Q	
Amount of surplus funds disbursed (from box A on form 4234)	8	
Total Expenditures (sum of above boxes)	4442.52	В

SEE AMENDMENT

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4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE KRISTINE KETTER	<u> </u>
	All Contributions
Individuals	4442,52
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	,
Total	\$4442.520 A
Anonymous contributions	\$ B
Total contributions (A + B)	s 4442.52 & C
Total significant contributions (must equal box A on all forms 4224)	\$ 4442,52 &
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



NAME OF CANDIDATE KRISTINE KETTER	
SEE AMENDMENT Individuals Corporations	All Contributions
Individuals .	
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit organizations	
Other Identifiable Contributors	_
Total	\$ & 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	\$ 0
Number of contributors who gave less than \$100	# &
Number of anonymous contributors	# &

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

ELECTIONS A non-partisan Office of the Legislature

PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	KRISTINE KETTER	2		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)	GLASS'	VALUE OF CONTRIBUTION
2014/11/15	KRISTINE KETTER		1	4442.52
;	·			
	·			
	,			
	·			
·				
		*		
F NEEDED, ATTACH A *CLASS OF CONTRIB 1 - INDIVIDUAL, 2 - C		WMERCIAL ORGANIZATION CONTR	TOTAL IBUTIONS	A -Q
4 - FRAUE UNION, 5	- NOR-L NORTH OROMANDATION, V ~ OTHER ROCKTIFEM	Juli Continuo (Ch	. •	4442.5

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



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE			PAGE
THE PROPERTY OF THE PROPERTY O	KRISTINE KETTER	7	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
		/	
	•		
	9 "		
	SEE AMENDMENT		
	SEE YAME		
-			
		,	
IF NEEDED, ATTACH A * CLASS OF CONTRIBU 1 - INDIVIDUAL, 2 - C	DDITIONAL FORMS UTOR: CORPORATION, 3 - UNINCORPORATED BUSINESS/CO - NON-PROFIT ORGANIZATION, 6 - OTHER IDENTIFIA	MMERCIAL ORGANIZATION CONTRIB	TOTAL A Q

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4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

KRISTINE)	KETTER				PAGE OF
ISTRUCTIONS: Complete one s Attach addition	heet for each prohib al forms If necessary	ited campaign con	tribution received.		
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	OR	DATE REMITTED TO ELECTIONS BC
☐ INDIVIDUAL ☐ ORGANIZATION L	(YYYY/MM/DD)	VIALUE	(YYYY/MM/DD)	<u> </u>	(YYYYIMMIDD)
☐ ANONYMOUS					
Complete this field if the prohibi			d from an Individual	l:	
DESCRIPTION OF HOW THE PROHIBITED C Complete this field if the prohibit NAME OF INDIVIDUAL Complete these fields if the proh	ted campaign contrik	oution was received			
Complete this field if the prohibi	ted campaign contrik	oution was received		zation:	CLASS*
Complete this field if the prohibiname of Individual. Complete these fields if the proh	ted campaign contrik	oution was received		zation:	CLASS*

*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

DATE OF TRANSFER (YYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
(YYY/MM/DD)			IRANSFER
			·
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4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	KRIS	STINE KETTER		PAGE OF
DATE (YYYY/MM/DD)	TYPE'	DESCRIPTION	Al	моинт
		· · ·		
	,			<u> </u>
·				
			-	
		•		
				· · · · · · · · · · · · · · · · · · ·

*TYPE:	***************************************	TOTAL	A	\searrow
I – Interest D – Dividends of shares positions of shares positions from prefix – Fundraising income no O – Other (describe)	aid by credit evious election of reported a		[A]	~

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4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE KRISTINE	LETTER			PAGE OF
DATE OF EVENT (YYYY/MM/DD) DESCRIPTIO	N OF FUNDRAISING EV	ENT		:
Income reported as campaign contributio	ns			
	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 i	ncome reported as	campaign contributions		
Remember to report all campaign contribution and if applicable, on form 4224 - Signification	utions on form 42: nt Contributors (\$	23 - Summary of Camp 100 or more).	paign Contribution	ns by Class,
Other income not reported as campaign c	ontributions			Tick if
Purchases by individuals of	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Charge per Ticket Varies
tickets of \$50 or less				
	·		•	

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE KRISTINE KETTER		
	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	145884	1458.84
Internet	148.51	148.51
Newspaper, magazine, journal	942.79	942.79
Radio		
Signs and billboards	1444.92	1444.92
Television		
Other advertising	-	,
CAMPAIGN ADMINISTRATION	1	
Salarles and wages	-	
Rent, insurance and utilities		
Courier and postage	.403.39	403.39
Furniture and equipment		
Office supplies	4407	44.07
Professional services		
Other campaign administration expenses	line man.	
Conventions and meetings		
Other campaign related functions		
Research and polling	Patrice	
Interest		
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses	,	
Legal and accounting services		
Financial agent services	and the same of th	
Other expenses (describe)		
r		
Total Expenses	A 4442.62	B 4442.52
Column A - Report the value of all election expenses for goods and services used in the cempalgn perior The campaign period is from January 1, 2014 to November 15, 2014.	d.	
olumn B - Report the value of all election expenses for goods and services used in the election proceed the election proceed to proceed the election proceed the election proceed to proceed t	dings period.	

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	NAME OF CANDIDATE KRISTINE KETFER				
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER		
•	,				
			·		
	·				
		•			
		•			
		·			
-			·		
*Also include legal name if r	sifferent than ballot name.	TOTAL	A A		

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4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	KR	STINE KETTER		OF
DATE (YYYY/MM/DD)	түре*	DESCRIPTION	AMo	ТИИС
	17-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			
		·		
	-	• .		
		·		
		· · · · · · · · · · · · · · · · · · ·		
TYPE: B Bank fees E Intended election exp			А	p

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F - Payments made for fundraising purposes N - Nomination deposit O - Other (describe)

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE





DESCRIPTION OF SHARED EXPENSE	KETTER	PAGE OF						
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	n 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:								
ruii names of other candidates with wi	nom the expense was shared:							
LAST NAME	nom the expense was shared:	MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						
		MIDDLE NAME						

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

sfers between candidate's	s own campaign accounts in same jurisdiction			
	PURPOSE			AMOUNT
4-1				,
······································				
				·
DATE OF TRANSFER	n campaign accounts in other jurisdictions	·····		**************************************
(YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)			AMOUNT
	·			
				, ,
				\
		TOTAL	Α	
sfers to candidate's own	campaign accounts in other jurisdictions			
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)			AMOUNT
			1	

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4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



K	RISTINE KETTER		
,	Balance remaining in campaign account(s) after payment of all expenses	. &	Α
	Total amount of campaign contributions from candidate	4442.52	В
Amount reimbursed to car	ndidate from campaign account for the candidate's contributions to their campaign	Ø	С
	Date of reimbursement to candidate (YYYY/MM/DD)		
	Amount of remaining surplus funds (after any reimbursement under box C)	×	D
	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 detalls of how it was disbursed.		
DATE (YYYY/MM/DD)	is less than \$500 provide details of how it was disbursed. DESCRIPTION	AMOUNT	
	· ·	AMOUNT	

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
	Δ.			
	•			
		•		
		·		

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE			<u> </u>
KRISTINE KES	TER		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	보통하다 아이라 하다 하는 그리 함께 보다		
FINANCIAL AGENT'S LAST NAME	FIRST NAME	1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MIDDLE NAME
NODE			
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
CHITTOWN		POSTAL CODE	ENAIL (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)			
EFFECTIVE DATE OF AFFORMMENT (TTTTMM) DOF) (1 - 1 - 1 - 1) (1) (1) (1) (1) (
FINANCIAL AGENT'S LAST NAME	FIRST NAME	<u> </u>	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
		***************************************	,
ESSECTIVE DATE OF ADDITIONAL ACCOUNTAGED			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
		<u> </u>	
FINANCIAL AGENT MAILING ADDRESS		1	PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
	Williams and the control of the control of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	