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

### ELECTIONS A non-partisan Office of the Legislature

#### PLEASE PRINT IN BLOCK LETTERS

Amendment #

CANDIDATE'S FULL NAME , A A A	GENERAL VOTING DAY (YYYY/MM/DD)
LANDIDATES FOUR NAME SAMUELS MILLER	2014 11 # 15
BALLOT NAME (IF DIFFERENT FROM ABOVE)	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
,	ADVISORY COUNCILLOR
MARINO ADDREGO	PHONE NO.
MAILING ADDRESS	16
ro. Box 1245	(604) 885-2188
CITY / TOWN POSTAL CODE	EMAIL (IF AVAILABLE)
SECURIT B.C. VON BAO	
	,
JURISDICTION C	TO A FULLY = (GAST)
SECHELT ILDOIAN BAND #2 (S	MENTE COASI
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)	
LEGITATINE OF ENDOTORING ELECTION ON WITH STRONG WITH STRONG CO.	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME
MILLED JOHN	Samuel
FINANCIAL AGENT'S MAILING ADDRESS	PHONE NO.
	(604) 885-2188
100, BOX 1245	
CITY/TOWN POSTAL CODE	EMAIL (IF AVAILABLE)
SECHELT B.C. VON 3AO	•
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	il agents, complete form 4236.
2014 8 01	agents, complete form 4250.
Tick if candidate was registered as a third party sponsor  Tick if candidate as	cted as a campaign organizer
This disclosure statement includes the following forms:	
- · · · · - · · - · · · · - · · · · · ·	(E) ( E + 1000 C)
Declarations and Campaign Accounts — Form 4221 🔟 Summar	y of Election Expenses - Form 4229
7	to Elector Occasionation Form 4000
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
Summary of Campaign Contributions by Class – Form 4223 V	Permissible Payments - Form 4231
Circuit cont Contributors (\$100 or more) Form 4224	ared Election Expense - Form 4232
Significant Contributors (\$100 or more) - Form 4224 V	ared Election Expense - Form 4232
7 188 10 1 0 18 18 7 100 V	T 4000 TV
Prohibited Campaign Contributions – Form 4225 💆 Transfers Between Can	didate's Own Accounts - Form 4233
Transfers Received from Elector Organization — Form 4226	ment of Surplus Funds - Form 4234
Other Permissible Deposits - Form 4227   Free Adver	tising from Jurisdiction - Form 4235
Fundraising Function Ticket Sales - Form 4228	vious Financial Agents – Form 4236 🖊
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### **4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT**

### LOCAL ELECTIONS CANDIDATE



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Amendment #

	Anendment #
CANDIDATE'S FULL NAME  BALLOT NAME (IF DIFFERENT FROM ABOVE)  CANDIDATE'S FULL NAME  BALLOT NAME (IF DIFFERENT FROM ABOVE)	GENERAL VOTING DAY (YYYY/MM/DD)  2014 11 14  OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
	ADVISORY COUXILLOR
MAILING ADDRESS PO. BOX 1245	PHONE NO. (GOLF) 885-2188
CITY/TOWN	POSTAL CODE EMAIL (IF AVAILABLE)
SECHELT B.C.	1 YON 13A0
JURISDICTION  SECHELT TOTAL BAY  ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA/LIF APPLIC	D#2 (SUNSHIVE COAST)
	·
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	· · · · · · · · · · · · · · · · · · ·
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS	PHONE NO.
PO. BOX 1245	(604) 885-2188
CITY/TOWN B.C.	POSTAL CODE EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)  2014 8 0 1 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	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  JOHN SAMUEL MILLER		
Declaration:		
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and acrequired under the Local Elections Campaign Financing Act (LECFA).	ocurately discloses the info	ormation
SIGNATURE OF CANDIDATE  AL MU	DATE: (YYYY/MM/DD) 2014 10	29
PRINTED NAME OF CANDIDATE JOHN SAMUEL MILLER.		
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)	
PRINTED NAME OF FINANCIAL AGENT	<u> </u>	'
Campaign accounts:		
NAME OF SAVINGS INSTITUTION	<u></u>	
ADDRESS		
NAME OF SAVINGS INSTITUTION ,		
ADDRESS		
NAME OF SAVINGS INSTITUTION		
ADDRESS		
NAME OF SAVINGS INSTITUTION		
ADDRESS		

### 4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	and to		
LAHOLE	SAMUEL	MILLER	
Declaration:			
I, the undersigned, declare that to the be required under the Local Elections Cam		f, this disclosure statement con	pletely and accurately discloses the information
SIGNATURE OF CANDIDATE	al Min	(3)	DATE: (YYYY/MM/DD) 2014 10 29
PRINTED NAME OF CANDIDATE	<u> </u>		
SIGNATURE OF FINANCIAL AGENT			DATE: (YYYY/MM/DD)
PRINTED NAME OF FINANCIAL AGENT		/	
Campaign accounts:			
NAME OF SAVINGS INSTITUTION			
ADDRESS			
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 JOHN SAMUEL MILLER	
Total value of campaign contributions from all sources (from box C on form 4223)	\$ 0.00
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)	\$0.00 A
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)	
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)	\$0.00 B

## 4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE JOHN SAMUEL MILLER	
	All Contributions
Individuals	
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	
Total	\$ 0,00 A
Anonymous contributions	\$ B
Total contributions (A + B)	\$5 0.00 c
Total significant contributions (must equal box A on all forms 4224)	\$ 0.00
Total contributions of less than \$100	\$ 0.60
Number of contributors who gave less than \$100	#
Number of anonymous contributors	#

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



NAME OF CANDIDATE	JOHN SAMUEL	MUER	***************************************	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
	·			
		:		cl
F NEEDED, ATTACH AC CLASS OF CONTRIBU 1 – INDIVIDUAL, 2 – CO	DDITIONAL FORMS TOR: DRPORATION, 3 – UNINCORPORATED BUSINESS/CON NON-PROFIT ORGANIZATION, 6 – OTHER IDENTIFIAE	MMERCIAL ORGANIZATION CONTRI	TOTAL BUTIONS	0.00

### 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



#### PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	11 Samu	eel Mic	LER		PAGE OF
INSTRUCTIONS: Complete one s Attach additiona	heet for each prohib al forms if necessary		tribution received.		
RECEIVED FROM	DATE	A 1/4 1 1 5 -	DATE		DATE REMITTED TO
☐ INDIVIDUAL ☐ ORGANIZATION	RECEIVED (YYYY/MM/DD)	\$ VALUE	RETURNED (YYYY/MM/DD)	OR	ELECTIONS BC (YYYY/MM/DD)
ANONYMOUS					
DESCRIPTION OF HOW THE PROHIBITED CO	ONTRIBUTION WAS RECEIV	ÆD		•	
Complete this field if the prohibit	ed campaign contrib	oution was receive	d from an individua	<b>l:</b>	
NAME OF INDIVIDUAL					murra.o.
Complete these fields if the proh	ibited campaign con	tribution was recei	ived from an organi	zation:	
NAME OF ORGANIZATION				Cı	ASS*
MAILING ADDRESS					
NAME OF DIRECTOR		NAME OF DIRE	CTOR		
	· · · · · · · · · · · · · · · · · · ·				

#### \* CLASSES OF CONTRIBUTORS:

 $<sup>1-</sup>INDIVIDUAL, 2-CORPORATION, 3-UNINCORPORATED \ BUSINESS/COMMERCIAL \ ORGANIZATION,$ 

<sup>4 -</sup> TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

# 4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	JOHN SAMUE	L Miller	PAGE OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
(1111)11(11)11(11)			
		·	
			14
Also include legal name if d	ifferent than ballot name.	TOTAL	A \$ 0.00

# 4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT

#### LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE	٣	JOHN SAMUEL MILLER	PAGE OF
DATE		,	
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		·	
			100
TYPE: I – Interest		тотл	A SO. 00
יש – טיvidends of shares p S – Surplus funds from pr	paid by credit revious election	union on returned by jurisdiction	

O - Other (describe)

F - Fundraising income not reported as a campaign contribution

### **4228 - FUNDRAISING FUNCTION TICKET SALES**

#### **LOCAL ELECTIONS CANDIDATE**







NAME OF CANDIDATE	Samuel	MILLER		PAGE OF
DATE OF EVENT (YYYY/MM/DD) DESCRIPTIO	N OF FUNDRAISING EV			
	The state of the s	•		
Income reported as campaign contribution	ns			Tick if
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	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	3	
	•	,		
Remember to report all campaign contrib and if applicable, on form 4224 - Significa Other income not reported as campaign of	nt Contributors (\$		paign Contributio	
				Tick if Charge per
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Ticket Varies
Purchases by individuals of tickets of \$50 or less				

## 4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers		
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		
XCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
ther expenses (describe)		
F-		
Total Expenses	A \$ 0.00	B 38
· <b>L</b>		

# 4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	JOHN SAMUEL	MILLER	PAGE
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1.00	
			A \$ 0.00
'Also include legal name if o	different than ballot name.	TOTAL	A "0,00

### **4231 - OTHER PERMISSIBLE PAYMENTS** FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE		50467	S A 10	W. I.	/	NΛ	-0						PAGE	
		70119-7	->/W	MUE		muc	-E-16-	<del>-</del>					OF	
DATE (YYYY/MM/DD)	TYPE*				DESCRI	IPTION						Α	MOUNT	:
													*****	
				<del></del>										
				******										
			<u></u>										· • · · · ·	
										:				
						****								
												lt.		
* TYPE:  B - Bank fees  E Intended election ever	nnoo that wa	no not used							T	OTAL	А	\$ 0	.00	>

F - Payments made for fundraising purposes

N - Nomination deposit

O - Other (describe)

### **4232 - SHARED ELECTION EXPENSE**

#### LOCAL ELECTIONS CANDIDATE







NAME OF CANDIDATE	Samuel Mille	ER_	PAGE OF				
DESCRIPTION OF SHARED EXPENSE							
	Total value of sh	nared 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	d from other candidates					
*Note: Remember to include your por Election Expenses. Full names of other candidates with v		ction expense on form 4229 - S	ummary of				
LAST NAME	FIRST NAME	MIDDLE NAME					

# 4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



#### LOCAL ELECTIONS CANDIDATE

ME OF CANDIDATE	W SAMUEL MILLER	PAGE OF
nsfers between candidate'	s own campaign accounts in same jurisdiction	
	PURPOSE	AMOUNT
		40.00
ansfers from candidate's ov	vn campaign accounts in other jurisdictions	
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
		70.00
		4
		TOTAL A POLOO
nnsfers to candidate's own	campaign accounts in other jurisdictions	
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
		#0.00
		fa
	·	TOTAL B
Т	he amounts in boxes <b>A</b> and <b>B</b> must be carried forward to forn	n <b>4222</b> .

### 4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	JOHN SAMUEL MILLER		
	Balance remaining in campaign account(s) after payment of all expenses	10.00	Α
	Total amount of campaign contributions from candidate	\$0.00	В
Amount reimbursed to	candidate from campaign account for the candidate's contributions to their campaign	\$0.00	С
	Date of reimbursement to candidate (YYYY/MM/DD)		
	Amount of remaining surplus funds (after any reimbursement under box C)	\$0.00	D
If the amount in Bo	ox 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.		
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT	
	•		

# 4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



AME OF CANDIDATE	542 SAMUEL	MillER				
Free advertising provided by jurisdiction						
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)				

## 4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	- A AL	. 0					
90H97 c	DANUEL MI	LEIC					
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)							
2014 8 01							
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME				
MILLER	20Km		SAMUEL				
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.				
PO. Box 1245			(604) 885 - 2188				
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)				
SECHELT	B.C.	VON 13AU					
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)				
FEFERTIAL DATE OF APPOINTMENT ASSOCIATION	1						
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)  SEC							
FINANCIAL AGENT'S LAST NAME	FIRST NAME	£ 5 €	MIDDLE NAME				
1		* *					
FINANCIAL AGENT MAILING ADDRESS		, i	PHONE NO.				
		,					
CITY/TOWN .		POSTAL CODE	EMAIL (IF AVAILABLE)				
<u>, , , , , , , , , , , , , , , , , , , </u>							