4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE

ELECTIONS A non-partisan Office of the Legislature
Amendment #
GENERAL VOTING DAY (YYYY/MM/DD) Ze 14 NOV 15
OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
ADVISORY COUNTILLOR
604-885-4407
EMAIL (IF AVAILABLE)
Segmentaring of
ERNMENT DISTRICT
MODICNAME
MIDDLE NAME
PHONE NO.
GLAN (IS AVAILABLE)
EMAIL (IF AVAILABLE)
ncial agents, complete form 4236.
te acted as a campaign organizer
mary of Election Expenses - Form 4229
ven to Elector Organization - Form 4230
ther Permissible Payments – Form 4231
Shared Election Expense - Form 4232
Candidate's Own Accounts - Form 4233
Candidate's Cynthocoditis - 1 Citi - 2200

CANDIDATE'S FULL NAME		GENERAL VOTING DAY (YYYY/MM/DD)
WILLIAM WALLACE SCOTLAND		2014 NOV 15
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
_{и (удин} ами)		ADVISORY COUNCILLOR PHONE NO.
MAILING ADDRESS		PHONE NO.
4453 STALASHEN DR CITYITOWN SECHELT BO.		60ct-885-4407
CITY / TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)
SECHELT Be.	VON 13.	41
SECHELT IN	mass G	OVERNMENT DISTRICT
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPL	ICABLE)	
ELECTOTAL ANCAI LOOAL THOU THE THE THOU		
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)		
		MIDDLE NAME
FINANCIAL AGENT'S LAST NAME FIRST NAME		MIDDEE IAME
		PHONE NO.
FINANCIAL AGENT'S MAILING ADDRESS		
	POSTAL CODE	EMAIL (IF AVAILABLE)
CITY / TOWN	POSTALGODE	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) If the	re were previous	financial agents, complete form 4236.
PARTY CONTROL		
Tick if candidate was registered as a third party sponsor	Tick if car	ndidate acted as a campaign organizer
This disclosure statement includes the following forms:		•
	1	Summary of Election Expenses - Form 4229
Declarations and Campaign Accounts — Form 4221	J	Summary of Election Expenses 7 5 mm 1225
Statement of Income and Expenses — Form 4222] Transfe	rs Given to Elector Organization - Form 4230
Statement of meetine and Expenses	.	
Summary of Campaign Contributions by Class - Form 4223		Other Permissible Payments - Form 4231
	1	Shared Election Expense - Form 4232
Significant Contributors (\$100 or more) - Form 4224		Snared Election Expense - Form 4232
- August 10 to 10	Transfore Beh	veen Candidate's Own Accounts - Form 4233
Prohibited Campaign Contributions – Form 4225	I Hansiers bei	Veeti Galididate 3 GMT/1000ditte
Transfers Received from Elector Organization — Form 4226	ገ	Disbursement of Surplus Funds - Form 4234
Hansiets Leceived from Elector Ordanization - 1 01111 4550	뢰	
Other Permissible Deposits - Form 4227] F	ree Advertising from Jurisdiction - Form 4235
	Res	
Fundraising Function Ticket Sales – Form 4228		Previous Financial Agents - Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	
NAME OF CANDIDATE WILLIAM WALLACE SCOTLAND	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement com- required under the Local Elections Campaign Financing Act (LECFA).	pletely and accurately discloses the information
SIGNATURE OF CANDIDATE Whoteand	DATE: (YYYY/MM/DD) 2014 OCT 22
PRINTED NAME OF CANDIDATE WILLIAM WALLACE SCOTLAND	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
DOINTED MANE OF ENANCIAL ACENT	
PRINTED NAME OF FINANCIAL AGENT	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION N/A	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION NAME	
ADDRESS	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE WILLIAM WALLACE SCOTUANS		
Total value of campaign contributions from all sources (from box C on form 4223)	NIL	
Transfers received from elector organization (from box A on form 4226)	NIG	
Total other permissible deposits (from box A on form 4227)	NIL	
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	NIL	
Total Income (sum of above boxes)	NIL	Α
1		
Election expenses (from box A on form 4229)	NIL	
Transfers to elector organization (from box A on form 4230)	13.21	i
Transiera to elector organization (ironi pox stori form income	Willen	
Total other permissible payments (from box A on form 4231)		
Total other permissible payments (from box A on form 4231)	MIL	
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)	NIL NIL	В

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



THE OF CHINDRATE AT THE OF CHINDREN		
NAME OF CANDIDATE WILLIAM WALLACE SCOTLAWI	\	
	All Contributions	7
Individuals	NIL	4
Corporations	NIC	
Unincorporated Business/Commercial Organizations	NIL	-
Trade Unions	NIL	-
Non-profit Organizations	NIL	_
Other Identifiable Contributors	NIL	
Total	\$ NIL	Α
Anonymous contributions	\$ NIL	В
	\$ 1/14	С
Total contributions (A + B)	10/2	
Total significant contributions (must equal box A on all forms 4224)	\$ N12	
Total contributions of less than \$100	\$ N14	
	/	7
Number of contributors who gave less than \$100) # N/C	
Number of anonymous contributors	s # N1L	

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



NAME OF CANDIDATE		a f				PAGE /
<i>l</i>	VILLIAM	WALLACE	Scoth	AND		OF 6
DATE OF CONTRIBUTION (YYYY/MM/DD)	(For class 2, 3	F CONTRIBUTOR , 4, 5 & 6, include f two directors)	ADDRESS (For class	OF CONTRIBUTOR 2, 3, 4, 5 & 6 only)	CLASS*	VALUE OF CONTRIBUTION
						P. Carlotte
			A4111111111111111111111111111111111111			
	The state of the s		And the second s			
	The state of the s		en comparato de la comparato d			
					2	
						Till Agent and the state of the
					4 + 100 and 14 + 1	41.00
	ECONOMIC PROPERTY OF THE PROPE					
IF NEEDED, ATTACH A	DDITIONAL FORMS	1		<u>, </u>	TOTAL	
* CLASS OF CONTRIBU 1 - INDIVIDUAL, 2 - CO 4 - TRADE UNION 5 -	HUR: ORPORATION, 3 – UNINC - NON-PROFIT ORGANIZA	ORPORATED BUSINESS/CO	MMERCIAL ORGANIZAT	TION CONT	TOTAL FRIBUTIONS	A NONE

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE WILLIAM	WALLAC	ie Sco	TUAND		PAGE 12 OF 3
NSTRUCTIONS: Complete one sl Attach additiona	neet for éach prohib Il forms if necessary	oited campaign con y.	tribution received.		
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED {YYYY/MM/DD}	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
INDIVIDUAL ORGANIZATION ANONYMOUS	(YYYY/MM/DD)	NIL	N/A		NA
DESCRIPTION OF HOW THE PROHIBITED CO	ONTRIBUTION WAS RECEI	VED	- N/A		
Complete this field if the prohibit	ed campaign contri	bution was receive	d from an individua		
NAME OF INDIVIDUAL	NE				
Complete these fields if the proh	ibited campaign co	ntribution was rece	ived from an organi	zation:	
NAME OF ORGANIZATION					CLASS*
MAILING ADDRESS	aneng.				
NAME OF DIRECTOR		NAME OF DIR	ECTOR		

^{*} 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

NAME OF CAMDIDATE WILLIAM WALLACE SCOTTLAND BALLOT NAME OF ELECTOR ORGANIZATION DESCRIPTION (IF NON-MONETARY) NONE NONE				
NONE NONE NONE NIL	NAME OF CANDIDATE ${\cal U}$	ILLIAM WALLACE	SCOTLAND	
	DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
		NONE	NONE	NIL
	Management of the Control of the Con			
TOTAL A IN / V	and the state of t			
TOTAL A IN / V				
TOTAL A IN / V				
TOTAL A IN / V				
TOTAL A IN / V				
TOTAL A IN (1)				
*Also include logal name if different than hallot name				
Also illotitud legai flattic il olillefetti triati pallot flettio.	*Also include legal name i	f different than ballot name.	ТОТА	LA NIL

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	WILL	IAM WALLACE SCOTLAND		PAGE 4
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	ΑÑ	TOUNT
NIC	NONE	NIA	N	14.
			1	
	10.			
				·
A PARTY NAMED IN COLUMN TO THE PARTY NAMED IN			- Library	
TYPE: I – Interest D – Dividends of shares	paid by credi	t union	A NE	DNE.
F – Surplus funds from p F – Fundraising income O – Other (describe)	not reported a	ion returned by jurisdiction as a campaign contribution		

ELECTIONS
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4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE





NAME OF CANDIDATE WILLIAM N	JALLACE	SCOTLA	118	PAGE 5
DATE OF EVENT (YYYY/MM/DD) DESCRIPTION	N OF FUNDRAISING EVE	NT WE		
ncome reported as campaign contributio	ons 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	Income reported as	Campaign contribution	NONE	
Remember to report all campaign contrib and if applicable, on form 4224 - Significa	outions on form 422 ant Contributors (\$	23 - Summary of Car 100 or more).	npaign Contributio	ns by Class,
Other income not reported as campaign o	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		NIA	NONE	

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

AME OF CANDIDATE WILLIAM WALLACE SO	Column A	Column B
DVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	NONE	NONE
Internet		
Newspaper, magazine, journal		
Radio		
Signs and billboards		
Television		
Other advertising		
AMPAIGN ADMINISTRATION		
Salaries and wages	NONE	NONE
Rent, insurance and utilities	4	
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	NONE	NONE
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe) No NE		
Total Expenses	A NONE	BNONE

The campaign period is from January 1, 2014 to November 15, 2014.

The election proceedings period is from September 30, 2014 to November 15, 2014.

Column B - Report the value of all election expenses for goods and services used in the election proceedings period.

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	WILLIAM WALLAC	E SCOTUAND	PAGE OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
N/A	NA	N/A	NIL
		1	
	·		
	·		
		·	
*Also include legal name i	if different than ballot name.	TOTAL	A NIL

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE	VILL	IAM WALLACE SCOTLAND	PAGE OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
MA	NA	N/A	N/A
			, \
** The second se	The ST. WESSELD ST.		
	The state of the s		
	-		
	20 Lab (18 Lab		
-			
TYPE:		тот	AL A 6/1/
B – Bank fees E – Intended election exp F – Payments made for fu	ense that wa Indraising ou	is not used	AL A NIL

N – Nomination deposit O – Other (describe)

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE



PAGE

PLEASE PRINT IN BLOCK LETTERS

SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE WILLIAM 1	WALLACE SCOTLA	PAGE OF			
DESCRIPTION OF SHARED EXPENSE W6WE					
Total value of shared election expense NowE					
	Total value of shared election expense **NowE** Candidate's portion of shared election expense* **NowE**				
Amount paid directly to supplier (if applicable)					
Amount of reimbursements given to other candidate(s)					
	Amount of reimbursements received from other candidates NoNE				
*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 w		MIDDLE NAME			
N/B	FIRST NAME	W/A			
es appare					

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE

ME OF CANDIDATE WILL A	m WALLACE SCOTHAND	PAGE OF
nsfers between candidate's	s own campaign accounts in same jurisdiction	
	PURPOSE	AMOUNT
		NIL
	NIA	
nsfers from candidate's ow	vn campaign accounts in other jurisdictions	
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
NA		NIL
	N/A.	
		TOTAL A NIL
nsfers to candidate's own	campaign accounts in other jurisdictions	
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
N/A		NIL
•	//	
	NA	
		TOTAL B N//
T	he amounts in boxes A and B must be carried forward to form 422	2.

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	NILLIAM WALLACE SCOTLAND		
	Balance remaining in campaign account(s) after payment of all expenses	NIL	Α
	Total amount of campaign contributions from candidate	NIL	В
Amount reimbursed	NIL	С	
	Date of reimbursement to candidate (YYYY/MM/DD)	N/A	
	Amount of remaining surplus funds (after any reimbursement under box C)	NIL	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).	NIL	
If the amount in E	Box D is less than \$500 provide details of how it was disbursed.		
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT	
NA		NIL	
4			
	N/A		
		A 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
		1	

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	LLIAM WALLA	CE SCOTZAND		
Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
NA	N/A			
/\				

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE						
WILLIAM WALLACE SCOTLAND						
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)					
N/A	Adding subficients					
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME			
NONE FINANCIAL AGENT MAILING ADDRESS	***************************************		PHONE NO.			
NIA						
CITY/TOWN ,		POSTAL CODE	EMAIL (IF AVAILABLE)			
NA		Commence of the second				
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)						
N/A						
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME			
FINANCIAL AGENT MAILING ADDRESS			THOUSE NO.			
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.			
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)			
N/A						
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)]	•				
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME			
FINANCIAL AGENT MAILING ADDRESS	1BOVE		PHONE NO.			
CITY/TOWN	40000	POSTAL CODE	EMAIL (IF AVAILABLE)			
-	•	Samuel and the same of the sam	- Company of the Comp			
EEEECTIVE DATE OF ADDOINTMENT DOOM WAYDON		<u> </u>				
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)						
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME			
			Name of the state			
FINANCIAL AGENT MAILING ADDRESS	PHONE NO.					
CITY/TOWN	H ABOVE	POSTAL CODE	EMAIL (IF AVAILABLE)			
SILTI OWNY		POSTAL CODE	EMPLE IL AVAILABLE)			
		* 1	<u> </u>			