

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # 1

CANDIDATE'S FULL NAME RHONDA ANNE FARRELL		GENERAL VOTING DAY (YYYY/MM/DD) 2016/02/20
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) SCHOOL BOARD TRUSTEE
MAILING ADDRESS PO Box 173		PHONE NO. 250 358 7798
CITY/TOWN NEW DENVER	POSTAL CODE VOG 1L50	EMAIL (IF AVAILABLE) thefarrellclan@yahoo.ca
JURISDICTION SCHOOL DISTRICT NO. 10 ARROW LAKES		
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) EASTERN ZONE		
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.
CITY/TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	If there were previous financial agents, complete form 4236.	

Tick if candidate acted as their own financial agent Tick if candidate was registered as a third party sponsor

This disclosure statement includes the following forms:

Declarations and Campaign Accounts – Form 4221 <input checked="" type="checkbox"/>	Summary of Election Expenses – Form 4229 <input type="checkbox"/>
Statement of Income and Expenses – Form 4222 <input checked="" type="checkbox"/>	Transfers Given to Elector Organization – Form 4230 <input type="checkbox"/>
Summary of Campaign Contributions by Class – Form 4223 <input type="checkbox"/>	Other Permissible Payments – Form 4231 <input type="checkbox"/>
Significant Contributors (\$100 or more) – Form 4224 <input type="checkbox"/>	Shared Election Expense – Form 4232 <input type="checkbox"/>
Prohibited Campaign Contributions – Form 4225 <input type="checkbox"/>	Transfers Between Candidate's Own Accounts – Form 4233 <input type="checkbox"/>
Transfers Received from Elector Organization – Form 4226 <input type="checkbox"/>	Disbursement of Surplus Funds – Form 4234 <input type="checkbox"/>
Other Permissible Deposits – Form 4227 <input type="checkbox"/>	Free Advertising from Jurisdiction – Form 4235 <input type="checkbox"/>
Fundraising Function Ticket Sales – Form 4228 <input type="checkbox"/>	Previous Financial Agents – Form 4236 <input type="checkbox"/>

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LOCAL ELECTIONS CANDIDATE



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SEE AMENDMENT

Amendment/ # _____

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MAILING ADDRESS PO Box 173		PHONE NO. 250 358 7798	
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| Other Permissible Deposits - Form 4227 <input type="checkbox"/> | Free Advertising from Jurisdiction - Form 4235 <input type="checkbox"/> |
| Fundraising Function Ticket Sales - Form 4228 <input type="checkbox"/> | Previous Financial Agents - Form 4236 <input type="checkbox"/> |

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <i>RHONDA ANNE FARRELL</i>

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 <i>[Signature]</i>	DATE: (YYYY/MM/DD) <i>2016/02/01</i>
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PRINTED NAME OF CANDIDATE <i>RHONDA FARRELL</i>
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SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
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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



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NAME OF CANDIDATE

RHONDA ANNE FARRELL

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)

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) **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) **B**