## 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



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A non-partisan Omo	e or the	Legisiature
Amendment #		

CANDIDATE'S FULL NAME  LORRIE GOWEN		GENERAL VOTING DAY (YYYY/MM/DD) 2016/01/09			
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)  TRUSTEE			
MAILING ADDRESS  5195 GOSSEN CREEK STREET  CITY/TOWN  POSTAL CODE		PHONE NO.  250 - 638 - 1337  EMAIL (IF AVAILABLE)			
TERRACE	N86 046	LORRIE. GOWEN EGNAIL. CO			
JURISDICTION  SCHOOL DISTRICT  COAST MOUNTAINS BOARD OF EDUCATION (SD82)  ELECTORAL AREA/LOCAL TRUST AREA/IRUSTEE ELECTORAL AREA (IF APPLICABLE)  AREA 3  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	FECTIVE 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 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	5 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	Pre	evious Financial Agents - Form 4236			

## 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

**LOCAL ELECTIONS CANDIDATE** 

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SEE AMENDMENT

SEE AMENDMENT

A non-partisan Office of the Legislature

CANDIDATE'S FULL NAME		GENERAL VOTING DAY (YYYY/MM/DD)		
LORRIE GOWEN				
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)		
MAILING ADDRESS		TRUSTEE		
5195 GOSSEN CREEK STREE	<del></del>	PHONE NO:		
CITY/TOWN	POSTAL CODE	250 - 638 - 1337 EMAIL (IF AVAILABLE)		
TERRACE	V86 DAG			
JURISDICTION		<del>/</del>		
	NE EN	ICATION!		
COAST MOUNTAINS BOARD	CABLE)	027(1.1010		
AREA 3	1			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)				
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)	p. net.			
	<u></u>			
FINANCIAL AGENT'S LAST NAME FIRST NAME	<del></del>	MIDDLE NAME		
		The state of the s		
FINANCIAL AGENT'S MAILING ADDRESS	Y- Y	PHONE NO.		
<i>f</i>				
CITY / TOWN	POSTAL CODE	EMAIL (IF AVAILABLE)		
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Fundraising Function Ticket Sales - Form 4228	Pre	evious Financial Agents - Form 4236		

This form is available for public inspection.
ORIGINAL — ELECTIONS BC
PLEASE KEEP A COPY FOR YOUR RECORDS

The information on this form is contacted under the authority of the crops European Currency Francing Act and the Linesham of Information and Protection of Protecty Act it will be used to action to be completed interruping nuise. By the top contact the Elections Sec Officer at 1-300-661-8683 is extensive. See or description of this information, contact the Elections Sec Officer at 1-300-661-8683 is extensive. Between Sec or PO Box 5215-50 in Proc Good section Sec Ost Section Sectio

## 4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE		
LORRIE GOWEN		
Declaration:		
, the undersigned, declare that to the best of my knowledge and belief, this disclosure states equired under the Local Elections Campaign Financing Act (LECFA).	ment completely and accurately discloses the information	
SIGNATURE OF CANDIDATE AC JOWEN	DATE (YYYY/MM/DD)	
	2016/01/07	
PRINTED NAME OF CANDIDATE  LORRIE GOWEN  SIGNATURE OF ENAMELIA ACENT		
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



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NAME OF CANDIDATE LOCKIE GOWEN		
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)	0	Α
Election expenses (from box A on form 4229)	0	
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	В