

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 CANDACE ALBERTA FAULKNER		GENERAL VOTING DAY (YYYY/MM/DD) 2016 FEB 20
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR
MAILING ADDRESS BOX 100		PHONE NO. 1-250-761-4201
CITY/TOWN ZEBALLOS BC.	POSTAL CODE V0P 1Z A0	EMAIL (IF AVAILABLE) candacerfaulkner@gmail.com
JURISDICTION VILLAGE OF ZEBALLOS		
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) N/A		
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) NA		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) NA		
FINANCIAL AGENT'S LAST NAME AS ABOVE	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 ☒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 ☐

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

The information on this form is collected under the authority of the Local Elections Campaign Financing Act and the Freedom of Information and Protection of Privacy Act. It will be used to administer campaign financing rules. If you have questions about the collection, use or disclosure of this information, contact the Elections BC Privacy Officer at 1-800-661-5583, electionsbc@elections.bc.ca or PO Box 9275 Stn Prov Govt Victoria, BC V8W 9J5

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

CANDACE ALBERTA FAULKNER

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

Candace A Faulkner

DATE: (YYYY/MM/DD)

2016,05,03

PRINTED NAME OF CANDIDATE

CANDACE FAULKNER

SIGNATURE OF FINANCIAL AGENT

AS ABOVE

DATE: (YYYY/MM/DD)

"

"

PRINTED NAME OF FINANCIAL AGENT

"

Campaign accounts:

NAME OF SAVINGS INSTITUTION

Coastal Community Credit Union - Port McNeill Branch

ADDRESS

1597-Broughton Blvd, P.O. Box 489, Port McNeill BC V0N 1R0

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

CANDACE ALBERTA FAULKNER

Total value of campaign contributions from all sources (from box C on form 4223)

0

Transfers received from elector organization (from box A on form 4226)

0

Total other permissible deposits (from box A on form 4227)

0

Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)

0

Total Income (sum of above boxes)

0

A

Election expenses (from box A on form 4229)

0

Transfers to elector organization (from box A on form 4230)

0

Total other permissible payments (from box A on form 4231)

0

Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)

0

Amount of surplus funds disbursed (from box A on form 4234)

0

Total Expenditures (sum of above boxes)

0

B