



ELECTIONS BC
A non-partisan Office of the Legislature

NOTICE OF DISQUALIFICATION

4237A
(16/08)

Event: 2014 General Local Elections

Candidate: Jason Kramer

Jurisdiction: Chilliwack

Office: Mayor

Section 47 of the *Local Elections Campaign Financing Act* (LECFA) requires each candidate to file a disclosure statement within 90 days after General Voting Day for an election, or within 120 days after General Voting Day with payment of a \$500 late filing fee.

For the 2014 General Local Elections, the deadlines were:

Filing deadline – February 13, 2015

Late filing deadline – March 16, 2015

The disclosure statement for Jason Kramer was received by Elections BC on February 19, 2015; however, the \$500 late filing fee was not received by the late filing deadline.

Therefore, in accordance with section 64 of LECFA, this candidate is disqualified from being nominated for, elected to or holding office on a local authority until after the next general local elections.

Contact:

Local Elections Campaign Financing

Toll-free phone: 1-855-952-0280

Email: electoral.finance@elections.bc.ca

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME Jason Kramer		GENERAL VOTING DAY (YYYY/MM/DD) 2014 / 11 / 15	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) Mayor	
MAILING ADDRESS 46047 Bole Ave Apt. 103		PHONE NO. 604-378-5279	
CITY / TOWN Chilliwack B.C	POSTAL CODE V2P 1Z07	EMAIL (IF AVAILABLE) thepowerof4jay@gmail.com	
JURISDICTION			
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)			

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 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 <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"/> |

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



ELECTIONS

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Amendment # _____

CANDIDATE'S FULL NAME <i>Jason Kramer</i>		GENERAL VOTING DAY (YYYY/MM/DD)	
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <i>Mayor</i>	
MAILING ADDRESS <i>46047 Bole Ave</i>		PHONE NO. <i>604-378-5274</i>	
CITY / TOWN <i>Chilliwack B.C</i>	POSTAL CODE <i>V2P 1Z07</i>	EMAIL (IF AVAILABLE) <i>thepowerof4jay@gmail.com</i>	
JURISDICTION			
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)			
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.		

SEE
AMENDMENT

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 <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"/> |

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

JASON KRAMER

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

DATE: (YYYY/MM/DD)

2015/02/13

PRINTED NAME OF CANDIDATE

JASON KRAMER

SIGNATURE OF FINANCIAL AGENT

DATE: (YYYY/MM/DD)

2015/02/13

PRINTED NAME OF FINANCIAL AGENT

Campaign accounts:

NAME OF SAVINGS INSTITUTION

RBC

ADDRESS

Chilliwack

NAME OF SAVINGS INSTITUTION

ADDRESS

NAME OF SAVINGS INSTITUTION

ADDRESS

NAME OF SAVINGS INSTITUTION

ADDRESS

4222 - STATEMENT OF INCOME AND EXPENSES

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

Jason Kramer

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