

**4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT**

**LOCAL ELECTIONS CANDIDATE**



PLEASE PRINT IN BLOCK LETTERS

Amendment # \_\_\_\_\_

CANDIDATE'S FULL NAME <b>BRIAN TAYLOR</b>		GENERAL VOTING DAY (YYYY/MM/DD)	
BALLOT NAME (IF DIFFERENT FROM ABOVE) -		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>Councillor</b>	
MAILING ADDRESS <b>5665 Spencer Rd</b>		PHONE NO. <b>250 443 5002</b>	
CITY / TOWN <b>Grand Forks</b>	POSTAL CODE <b>V0H 1H5</b>	EMAIL (IF AVAILABLE) <b>bct6007@gmail.com</b>	
JURISDICTION <b>City of Grand Forks</b>			
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 <b>Grand Forks</b>	POSTAL CODE	EMAIL (IF AVAILABLE)	
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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 checked="" type="checkbox"/>               |
| Statement of Income and Expenses - Form 4222 <input checked="" type="checkbox"/>             | Transfers Given to Elector Organization - Form 4230 <input checked="" type="checkbox"/>    |
| Summary of Campaign Contributions by Class - Form 4223 <input checked="" type="checkbox"/>   | Other Permissible Payments - Form 4231 <input checked="" type="checkbox"/>                 |
| Significant Contributors (\$100 or more) - Form 4224 <input checked="" type="checkbox"/>     | Shared Election Expense - Form 4232 <input checked="" type="checkbox"/>                    |
| Prohibited Campaign Contributions - Form 4225 <input checked="" type="checkbox"/>            | Transfers Between Candidate's Own Accounts - Form 4233 <input checked="" type="checkbox"/> |
| Transfers Received from Elector Organization - Form 4226 <input checked="" type="checkbox"/> | Disbursement of Surplus Funds - Form 4234 <input checked="" type="checkbox"/>              |
| Other Permissible Deposits - Form 4227 <input checked="" type="checkbox"/>                   | Free Advertising from Jurisdiction - Form 4235 <input checked="" type="checkbox"/>         |
| Fundraising Function Ticket Sales - Form 4228 <input checked="" type="checkbox"/>            | Previous Financial Agents - Form 4236 <input checked="" type="checkbox"/>                  |

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 1-800-661-8683, electionsbc@elections.bc.ca or PO Box 9275 Stn Prov Govt Victoria, BC V8W 9J6.

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS  
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE  
BRIAN TAYLOR

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: Brian Taylor  
DATE: (YYYY/MM/DD) 2016/8/1  
PRINTED NAME OF CANDIDATE: BRIAN TAYLOR

SIGNATURE OF FINANCIAL AGENT: —  
DATE: (YYYY/MM/DD)  
PRINTED NAME OF FINANCIAL AGENT: —

Campaign accounts:

NAME OF SAVINGS INSTITUTION: Grand Forks District Savings Credit  
ADDRESS: 447 Market St Ave Union

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

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**

**4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS**

**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE

**All Contributions**

Individuals	500-	
Corporations		
Unincorporated Business/Commercial Organizations		
Trade Unions		
Non-profit Organizations		
Other Identifiable Contributors		
<b>Total</b>	<b>\$ 500-</b>	<b>A</b>

Anonymous contributions \$ 0 **B**

Total contributions (A + B) \$ **C**

Total significant contributions (must equal box **A** on all forms 4224) \$ 600

Total contributions of less than \$100 \$ 100

Number of contributors who gave less than \$100 # 2

Number of anonymous contributors # 0



# 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <div style="font-size: 2em; font-family: cursive;">BRIAN TAYLOR</div>	PAGE <input style="width: 40px; height: 20px;" type="text"/> OF <input style="width: 40px; height: 20px;" type="text"/>
<b>INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received.                  Attach additional forms if necessary.</b>	

RECEIVED FROM	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION  <input type="checkbox"/> ANONYMOUS					

DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED

**Complete this field if the prohibited campaign contribution was received from an individual:**

NAME OF INDIVIDUAL

**Complete these fields if the prohibited campaign contribution was received from an organization:**

NAME OF ORGANIZATION	CLASS*
MAILING ADDRESS	
NAME OF DIRECTOR	NAME OF DIRECTOR

**\* CLASSES OF CONTRIBUTORS:**  
 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER







# 4228 - FUNDRAISING FUNCTION TICKET SALES

## LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <b>BRIAN TAYLOR</b>	PAGE <input type="text"/>
	OF <input type="text"/>

DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT
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**Income reported as campaign contributions**

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Total income reported as campaign contributions				<input type="text"/>

Remember to report all campaign contributions on form 4223 - Summary of Campaign Contributions by Class, and if applicable, on form 4224 - Significant Contributors (\$100 or more).

**Other income not reported as campaign 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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

# 4229 - SUMMARY OF ELECTION EXPENSES

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE  
**BRIAN TAYLOR**

	Column A Election Expenses	Column B Election Proceedings Period Expenses
<b>ADVERTISING</b>		
Brochures, pamphlets and flyers		
Internet	150.00	
Newspaper, magazine, journal	202.61	
Radio		
<i>Buttons</i> Signs and billboards	140.	
Television		
Other advertising		
<b>CAMPAIGN ADMINISTRATION</b>		
Salaries and wages		
Rent, insurance and utilities		
Courier and postage		
Furniture and equipment		
Office supplies		
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions		
Research and polling		
<i>(Service charge)</i> Interest	4.75	
<b>EXCLUSIONS THAT MUST BE REPORTED</b>		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe)		
<b>Total Expenses</b>	<b>A</b> 497.36	<b>B</b>

**Column A** - Report the value of all election expenses for goods and services used in the campaign period.

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





**4232 - SHARED ELECTION EXPENSE**

**LOCAL ELECTIONS CANDIDATE**

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE

BRIAN TAYLOR

PAGE

OF

DESCRIPTION OF SHARED EXPENSE

Total value of shared election expense

Candidate's portion of shared election expense\*

Amount paid directly to supplier (if applicable)

Amount of reimbursements given to other candidate(s)

Amount of reimbursements received from other candidates

\*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 whom the expense was shared:

LAST NAME	FIRST NAME	MIDDLE NAME

# 4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS

## LOCAL ELECTIONS CANDIDATE

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NAME OF CANDIDATE

BRIAN TAYLOR

PAGE

OF

### Transfers between candidate's own campaign accounts in same jurisdiction

PURPOSE	AMOUNT

### Transfers from candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		<b>A</b>

### Transfers to candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		<b>B</b>

The amounts in boxes **A** and **B** must be carried forward to form 4222.

# 4234 - DISBURSEMENT OF SURPLUS FUNDS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE  
**BRIAN TAYLOR**

*CU share - 25.-*

Balance remaining in campaign account(s) after payment of all expenses  **A**

Total amount of campaign contributions from candidate  **B**

Amount reimbursed to candidate from campaign account for the candidate's contributions to their campaign  **C**

Date of reimbursement to candidate (YYYY/MM/DD)

Amount of remaining surplus funds (after any reimbursement under box C)  **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).

If the amount in Box D is less than \$500 provide details of how it was disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
2016/6/16	Payment to Candidate CU share included	139.40





# 4236 - PREVIOUS FINANCIAL AGENTS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE <b>BRIAN TAYLOR</b>			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)