

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME BEVERLEY ANN TRIPP		GENERAL VOTING DAY (YYYY/MM/DD) 2016/05/28	
BALLOT NAME (IF DIFFERENT FROM ABOVE) BEV TRIPP		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR	
MAILING ADDRESS BOX 56		PHONE NO. 250-442-6000	
CITY/TOWN GRAND FORKS	POSTAL CODE V0H 1H0	EMAIL (IF AVAILABLE) bb110212@gmail.com	
JURISDICTION City of Grand Forks			
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 TRIPP	FIRST NAME TOM	MIDDLE NAME N	
FINANCIAL AGENT'S MAILING ADDRESS Box 56		PHONE NO. 250-442-6000	
CITY/TOWN GRAND FORKS	POSTAL CODE V0H 1H0	EMAIL (IF AVAILABLE) Tnt110212@gmail.com	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2016/04/01 → 2016/05/28 ^(TICK)	If there were previous financial agents, complete form 4236.		
<input type="checkbox"/> Tick if candidate acted as their own financial agent		<input type="checkbox"/> 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 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 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 checked="" type="checkbox"/>		
Other Permissible Deposits - Form 4227 <input type="checkbox"/>	Free Advertising from Jurisdiction - Form 4235 <input checked="" type="checkbox"/>		
Fundraising Function Ticket Sales - Form 4228 <input type="checkbox"/>	Previous Financial Agents - Form 4236 <input type="checkbox"/>		

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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 election, see the disclosure of this information, contact the Elections BC Privacy Officer at 1-800-661-8882, mactioral@elections.bc.ca or PO Box 9276 Van Ness Victoria, BC V8N 5R6

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



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Amendment # _____

CANDIDATE'S FULL NAME BEVERLEY ANN TRIPP		GENERAL VOTING DAY (YYYY/MM/DD) 2016/05/28	
BALLOT NAME (IF DIFFERENT FROM ABOVE) BEV TRIPP		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) COUNCILLOR	
MAILING ADDRESS Box 56		PHONE NO. 250-442-6000	
CITY/TOWN GRAND FORKS	POSTAL CODE V0H 1H0	EMAIL (IF AVAILABLE) bb110212@gmail.com	
JURISDICTION City of Grand Forks			
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 TRIPP	FIRST NAME TOM	MIDDLE NAME N	
FINANCIAL AGENT'S MAILING ADDRESS Box 56		PHONE NO. 250-442-6000	
CITY/TOWN GRAND FORKS	POSTAL CODE V0H 1H0	EMAIL (IF AVAILABLE) Tnt110212@gmail.com	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2016/03/28¹⁷	<input checked="" type="checkbox"/> If these were previous financial agents, complete form 4236.		
<input type="checkbox"/> Tick if candidate acted as their own financial agent		<input type="checkbox"/> 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 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 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 checked="" type="checkbox"/>		
Other Permissible Deposits - Form 4227 <input type="checkbox"/>	Free Advertising from Jurisdiction - Form 4235 <input checked="" type="checkbox"/>		
Fundraising Function Ticket Sales - Form 4228 <input type="checkbox"/>	Previous Financial Agents - Form 4236 <input type="checkbox"/>		

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**SEE
AMENDMENT**

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE BEV TRIPP	
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) 2016/06/28 26
PRINTED NAME OF CANDIDATE BEV TRIPP	
SIGNATURE OF FINANCIAL AGENT 	DATE: (YYYY/MM/DD) 2016/06/28 26
PRINTED NAME OF FINANCIAL AGENT TOM TRIPP	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION GRAND FORKS DISTRICT SAVINGS CREDIT UNION	
ADDRESS Box 2500, 447 Market Ave, GRAND FORKS, BC V0N 1H0	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

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Questions? Contact: Privacy Officer, Elections BC
1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE BEV TRIPP	
<p>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 <i>Local Elections Campaign Financing Act</i> (LECFA).</p>	
SIGNATURE OF CANDIDATE <i>Bev Tripp</i>	DATE: (YYYY/MM/DD) 2016/06/28
PRINTED NAME OF CANDIDATE BEV TRIPP	
SIGNATURE OF FINANCIAL AGENT <i>Tom Tripp</i>	DATE: (YYYY/MM/DD) 2016/06/28
PRINTED NAME OF FINANCIAL AGENT TOM TRIPP	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION GRAND FORKS DISTRICT SAVINGS CREDIT UNION	
ADDRESS Box 2500, 447 Market Ave, GRAND FORKS, BC V0H 1H0	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

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Questions? Contact: Privacy Officer, Elections BC
1-800-661-8883, PO Box 9275 Stn Prov Govt, Victoria BC V8W 8J6

4222 - STATEMENT OF INCOME AND EXPENSES**LOCAL ELECTIONS CANDIDATE**

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NAME OF CANDIDATE		BEV TRIPP
Total value of campaign contributions from all sources (from box C on form 4223)		\$ 1,180.00
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)		\$ 1,180.00 A
Election expenses (from box A on form 4229)		\$ 1,023.53
Transfers to elector organization (from box A on form 4230)		—
Total other permissible payments (from box A on form 4231)		\$ 66.90
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)		\$ 89.57
Total Expenditures (sum of above boxes)		\$ 1,180.00 B

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 Questions? Contact: Privacy Officer, Elections BC
 1-800-861-8883 PO Box 9275 Stn Prov. Govt, Victoria BC V8W 3J6

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE Bev Tripp	
All Contributions	
Individuals	<u>1180.00</u>
Corporations	<u> </u>
Unincorporated Business/Commercial Organizations	<u> </u>
Trade Unions	<u> </u>
Non-profit Organizations	<u> </u>
Other Identifiable Contributors	<u> </u>
Total	\$ <u>1180.00</u> A
Anonymous contributions	\$ <u> </u> B
Total contributions (A + B)	\$ <u>1180.00</u> C
Total significant contributions (must equal box A on all forms 4224)	\$ 1180.00 900.00
Total contributions of less than \$100	\$ <u>280.00</u>
Number of contributors who gave less than \$100 # <u>5</u>	
Number of anonymous contributors # <u>0</u>	

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 1-800-661-8683 - PO Box 9275 Stn Prov Govt, Victoria BC V8W 5J6

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE																	
<p>SEE AMENDMENT</p>	<table border="1"> <tr> <th colspan="2">All Contributions</th> </tr> <tr> <td>Individuals</td> <td>\$ 1180.00</td> </tr> <tr> <td>Corporations</td> <td>—</td> </tr> <tr> <td>Unincorporated Business/Commercial Organizations</td> <td>—</td> </tr> <tr> <td>Trade Unions</td> <td>—</td> </tr> <tr> <td>Non-profit Organizations</td> <td>—</td> </tr> <tr> <td>Other Identifiable Contributors</td> <td>—</td> </tr> <tr> <td>Total</td> <td>\$ 1180.00 A</td> </tr> </table>	All Contributions		Individuals	\$ 1180.00	Corporations	—	Unincorporated Business/Commercial Organizations	—	Trade Unions	—	Non-profit Organizations	—	Other Identifiable Contributors	—	Total	\$ 1180.00 A
	All Contributions																
	Individuals	\$ 1180.00															
	Corporations	—															
	Unincorporated Business/Commercial Organizations	—															
	Trade Unions	—															
	Non-profit Organizations	—															
	Other Identifiable Contributors	—															
	Total	\$ 1180.00 A															
	Anonymous contributions	\$ — B															
Total contributions (A + B)	\$ 1180.00 C																
Total significant contributions (must equal box A on all forms 4224)	\$ 1180.00																
Total contributions of less than \$100	\$ 280.00																
Number of contributors who gave less than \$100	# 5																
Number of anonymous contributors	# 0																

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4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE: BEV TRIPP PAGE: OF:

Table with 5 columns: DATE OF CONTRIBUTION, FULL NAME OF CONTRIBUTOR, ADDRESS OF CONTRIBUTOR, CLASS, VALUE OF CONTRIBUTION. Rows include Tom Tripp (2016/04/01), Julia Butler (2016/04/03), Gene Koch (2016/05/03), and Bev Tripp (2016/04/01).

250.00

IF NEEDED, ATTACH ADDITIONAL FORMS CLASS OF CONTRIBUTOR: 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION, 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER IDENTIFIABLE CONTRIBUTOR

TOTAL CONTRIBUTIONS A \$ 1,180.00

900.00

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4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE BEV TRIPP PAGE
 OF

DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6, include full names of two directors)	ADDRESS OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6 only)	CLASS*	VALUE OF CONTRIBUTION
2016/04/01	Tom + Bev Tripp	8	1	500.00
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
2016/04/02	Julia Butler		1	300.00
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
2016/05/03	Gene Koch		1	100.00
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

IF NEEDED, ATTACH ADDITIONAL FORMS
 *CLASS OF CONTRIBUTOR:
 1 - INDIVIDUAL 2 - CORPORATION 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION
 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER IDENTIFIABLE CONTRIBUTOR

TOTAL CONTRIBUTIONS **A** \$ 1,180.00

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**SEE
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4229 - SUMMARY OF ELECTION EXPENSES
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE BEV TRIPP		
	Column A Election Expenses	Column B Election Proceedings Period Expenses
ADVERTISING		
Brochures, pamphlets and flyers	285.44	72.44
Internet		
Newspaper, magazine, journal		
Radio		
Signs and billboards	738.09	252.09 738.09
Television		
Other advertising		
CAMPAIGN ADMINISTRATION		
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		
Interest		
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
Other expenses (describe)		
Total Expenses:	A 1023.53	B 324.44 810.53
Column A - Report the value of all election expenses for goods and services used in the campaign period.	(Jan. 1 - May 28/16)	
Column B - Report the value of all election expenses for goods and services used in the election proceedings period.	(Apr. 22 - May 28/16)	

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4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE		
BEV TRIPP		
	Column A	Column B
	Election Expenses	Election Proceedings Period Expenses
ADVERTISING	Brochures, pamphlets and flyers	285.44
	Internet	
	Newspaper, magazine, journal	
	Radio	
	Signs and billboards	738.09
	Television	252.00
	Other advertising	
CAMPAIGN ADMINISTRATION	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	
EXCLUSIONS THAT MUST BE REPORTED	Interest	
	Personal election expenses	
	Interest on loans for election expenses	
	Legal and accounting services	
	Financial agent services	
Other expenses (describe)		
Total Expenses		
	A 1023.53	B 324.44
Column A - Report the value of all election expenses for goods and services used in the campaign period. (Jan 1 - May 28/16) Column B - Report the value of all election expenses for goods and services used in the election proceedings period. (Apr. 22 - May 28/16)		

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**4231 - OTHER PERMISSIBLE PAYMENTS
FROM CAMPAIGN ACCOUNT
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE BEV TRIPP PAGE 1
OF 1

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
2016/04/30	B	Service Charge	6.25
2016/05/31	B	Service Charge	4.00
2016/06/06	O	Gazette "Thank You" Ad	50.65
2016/06/24	B	Service Charge	4.00
2016/06/24	B	Transaction Fee	2.00
TOTAL			A <u>66.90</u>

*TYPE:
 B - Bank fees
 E - Intended election expense that was not used
 F - Payments made for fundraising purposes
 N - Nomination deposit
 O - Other (describe)

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4234 - DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE		BEV TRIPP	
Balance remaining in campaign account(s) after payment of all expenses	\$ 89.57	A	
Total amount of campaign contributions from candidate	500.00	B	250.00
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)	\$ 89.57	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	
2016/06/24	Credit Union account closed and balance (minus roundoff) was reimbursed to the candidate	\$ 89.57	

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4234 - DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE		BEV TRIPP
Balance remaining in campaign account(s) after payment of all expenses	\$ 89.57	A
Total amount of campaign contributions from candidate	\$ 500.00	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)	\$ 89.57	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
2016/06/24	Credit Union account closed and balance (minus roundoff) was reimbursed to the candidate	\$ 89.57

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4235 - FREE ADVERTISING FROM JURISDICTION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE
BEV TRIPP

Free advertising provided by jurisdiction

DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
2016/05/25	City of Grand Forks	Newspaper (All Candidates Forum)
2016/05/18	City of Grand Forks	Website (All Candidates Forum)
2016/05/25	City of Grand Forks	Newspaper (Candidate Biographies)

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4235 - FREE ADVERTISING FROM JURISDICTION

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE		
BEV TRIPP		
Free advertising provided by jurisdiction		
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
2016/05/25	City of Grand Forks	Newspaper (All Candidates Forum)
2016/05/18	City of Grand Forks	Website (All Candidates Forum)
2016/05/25	City of Grand Forks	Newspaper (Candidate Biographies)

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