4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



Amendment #

CANDIDATE'S FULL NAME CARRIE JEAN POWELL - DA	IUIDSON	GENERAL VOTING DAY (YYY)	Y/MM/DD) 22
BALLOT NAME (IF DIFFERENT EROM ABOVE) CARRIE TOWELL-DAVIDSO	N	COUNCIL	
MAGNOLIA DRIVE		PHONE NO.	
TARKSUILLE	POSTAL CODE V9P 2P6	EMAIL (IF AVAILABLE)	
JURISDICTION OF PARKSUILLE			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLI	CABLE)		
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	
MOSSMAN GAI			
222 STRAWBERRY CR.		phone no. <i>2</i> 50 - 586 - 7	783
TARKSVILLE	POSTAL CODE	250 - 586 - 7 EMAIL (IF AVAILABLE) galmoss C s	haw.ca
2016 09 17 If there	were previous financia	l agents, complete form	4236.
Tick if candidate acted as their own financial agent	Tick if candidate wa	as registered as a third pa	rty 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	o Elector Organization -	Form 4230
Summary of Campaign Contributions by Class – Form 4223	Other I	Permissible Payments -	Form 4231
Significant Contributors (\$100 or more) - Form 4224	Sha	ared Election Expense -	Form 4232
Prohibited Campaign Contributions - Form 4225	Transfers Between Cand	lidate's Own Accounts -	Form 4233
Transfers Received from Elector Organization - Form 4226	Disbursen	nent of Surplus Funds -	Form 4234 🔽
Other Permissible Deposits - Form 4227	Free Advert	ising from Jurisdiction -	Form 4235
Fundraising Function Ticket Sales – Form 4228	Prev	vious Financial Agents –	Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE CARRIE FOWELL - DAULOSON	
Declaration:	
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and acc required under the <i>Local Elections Campaign Financing Act</i> (LECFA).	urately discloses the information
SIGNATURE OF CANDIDATE Manuatson	DATE: (YXY/MM/DD) HD: 3016 12 0
PRINTED NAME OF CANDIDATE CARRIE TOWELL - DAVIDSON	7.00
SIGNATURE OF FIMANCIAL AGENT	DATE: (YYYY/MM/DD)
L'ale Mossman	2016/12/07
PRINTED NAME OF FINANCIAL AGENT	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION TO CANADA TRUST	
ADDRESS 115 ALBERNI HIGHWAY, PARKSVILLE, E	3.C. V9P2G9
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE CARRIE POWELL-DRUIDSON		
CARRIE TOWELL-WAUIDSON		
Total value of campaign contributions from all sources (from box C on form 4223)	1,460 -	
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)	1,460 -	A
Election expenses (from box A on form 4229)	1,449.19	
Transfers to elector organization (from box A on form 4230)	=	
Total other permissible payments (from box A on form 4231)	<u>~</u>	
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)	10.81	
Total Expenditures (sum of above boxes)	1,460.00	В

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



Individuals Individuals
Individuals 1460 - Corporations - Unincorporated Business/Commercial Organizations - Trade Unions -
Corporations Unincorporated Business/Commercial Organizations Trade Unions
Unincorporated Business/Commercial Organizations Trade Unions
Trade Unions —
Non-profit Organizations
Other Identifiable Contributors —
Total \$ 1460 - A
Anonymous contributions \$ — B
Total contributions (A + B) \$ 1460 - c
Total significant contributions (must equal box A on all forms 4224)
Total contributions of less than \$100 \$
Number of contributors who gave less than \$100 #
Number of anonymous contributors #

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	PRIE POWELL-DAVI	DSON		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
2016/09/12	Carrie POWELL-DAUIPSON			200.00
2016/09/12	Gale Mossman			100.00
2014 = 27	Carrie Powell-Davidson		1	100.00
2016/09/30	Carrie Towell-Davidso		1 -	170.00
2016/09/50	Gale Mossman			50-00
2016 3 30	Carrie Towell-DAUIDSO		- \	840.00
,				
· -			:	
	. •		-	
	·			
F NEEDED, ATTACH ALL CLASS OF CONTRIBU 1 - INDIVIDUAL, 2 - CO		VIMERCIAL ORGANIZATION CONTRIBU	TOTAL JTIONS	1,410-

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE CARRIE TOW	ELL- DAU	IDSON			PAGE
NSTRUCTIONS: Complete one s Attach addition	heet for each prohib al forms if necessary		tribution received.		
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	OR	DATE REMITTED TO
☐ INDIVIDUAL ☐ ORGANIZATION ☐ ANONYMOUS	(YYYY/MM/DD)	♦ VALUE	(YYYY/MM/DD)		(YYYY/MM/DD)
. 선생님 [1] 2. [1] 전 1 [1] 전 2 [2] (1) [1] 전 2 [2] 전 2 [2] (2] (2] (2] (2] (2] (2] (2] (2] (2] (
	ted campaign contrib	oution was receive	d from an individual		
NAME OF INDIVIDUAL					
Complete this field if the prohibit NAME OF INDIVIDUAL Complete these fields if the prohibit NAME OF ORGANIZATION				ation:	CLASS*
NAME OF INDIVIDUAL Complete these fields if the proh				ation:	CLASS*

* CLASSES OF CONTRIBUTORS:

 $^{1-\}mathsf{INDIVIDUAL}, 2-\mathsf{CORPORATION}, 3-\mathsf{UNINCORPORATED} \ \mathsf{BUSINESS/COMMERCIAL} \ \mathsf{ORGANIZATION}, \\ 4-\mathsf{TRADE} \ \mathsf{UNION}, 5-\mathsf{NON-PROFIT} \ \mathsf{ORGANIZATION}, 6-\mathsf{OTHER} \\$

4226 - TRANSFERS RECEIVED FROM ELECTOR ORGANIZATION



LOCAL ELECTIONS CANDIDATE

CARRI	E POWELL-DAVIDS	Son	PAGE \
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
			·

*Also include legal name if o	different than ballot name.	TOTAL	A -

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
(YYYY/MM/DD)	1175	DESCRIPTION	AMOUNT
			
· · · · · · · · · · · · · · · · · · ·			
<u> </u>	1	TOTAL	A 0

O - Other (describe)

F - Fundraising income not reported as a campaign contribution

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE







ATE OF EVENT (YYYY/MM/DD) DESCRIPTION	ON OF FUNDRAISING EVI	ENT		
ncome reported as campaign contribution	ons			Tick if
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Charge per Ticket Varies
Purchases by organizations				
Purchases by individuals of more than \$250 worth of tickets				
Purchases by individuals of tickets that are more than \$50 each				
• • • • • • • • • • • • • • • • • • • •			<u> </u>	
·	income reported as	campaign contribution	ns	LJ
·	outions on form 42: ant Contributors (\$	23 - Summary of Car		ns by Class, Tick if Charge per Ticket Varies

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	335.50	335,58
Internet		
Newspaper, magazine, journal	836.33	836.33
Radio		
Signs and billboards	264.32	264.32.
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		
BANK Charge Other campaign related functions	13.04	8.09
Research and polling		
Interest		
XCLUSIONS THAT MUST BE REPORTED		
Personal election expenses		
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
ther expenses (describe)		
Total Expenses A	1,449.19	B 1444 24
	7 1 1 101 1	1,11,54

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE CARRIE	= POWELL-DAVID	750N	PAGE 1
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
*Also include legal name if	different than ballot name.	TOTAL	A -

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

CARRIE POWELL - DAVIDSON			
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
*TYPE: B – Bank fees E – Intended election expe F – Payments made for fur N – Nomination deposit	nse that wa	TOTAL is not used irrposes	A

O - Other (describe)

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE





26	ELECTIONS A non-partisan Office of the Lec	E C.,
	A non-partisan Office of the Leg	gislature

CARRIE TOW	JELL-DAVIDSON		OF
SCRIPTION OF SHARED EXPENSE			
	Total value of sha	ared election expense	
	Candidate's portion of sha	red election expense*	
Amount paid directly to supplier (if applicable)			
	Amount of reimbursements give	n to other candidate(s)	,
	Amount of reimbursements received	from other candidates	
Note: Remember to include yo	our portion of the shared expense as an elec	ction expense on form 422	9 - Summary
Election Expenses.	with whom the expense was shared:		Jan
Election Expenses.		MIDDLE N	
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		
Election Expenses.	with whom the expense was shared:		

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

CARRIE T	OWELL-DAVIDSON		PAGE OF
sfers between candidate's	own campaign accounts in same jurisdiction		
	PURPOSE		AMOUNT
			-
	· .		
sfers from candidate's ow	n campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
			-0
		TOTAL	A -
sfers to candidate's own o	campaign accounts in other jurisdictions		
DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)		AMOUNT
			0

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE	= POWELL-DAUIDSON	
	Balance remaining in campaign account(s) after payment of all expenses	10.81 A
	Total amount of campaign contributions from candidate	1,310-в
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)	10.810
If the amount in Be	ox 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 Bo	x D is less than \$500 provide details of how it was disbursed.	
DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
2016/12/4	Bal Paid to CANDIDATE	3 10.80
-		
·		

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE CARRIE POWELL-DAVIDSON				
Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
	-			

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE CARRIE POWELL - DAVIDSON				
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)				
FINANCIAL AGENT'S LAST NAME N A.	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	okarinina in iliku in na iku ili akiri <u>ili akiri ili akiri ili akiri ili akiri ili akiri ili akiri ili akiri il</u>	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	e generalita amia a cal	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)	