

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

CANDIDATE'S FULL NAME Ronald Joseph		GENERAL VOTING DAY (YYYY/MM/DD) 2017/02/25	
BALLOT NAME (IF DIFFERENT FROM ABOVE) Ron Joseph		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) Councillor	
MAILING ADDRESS 1489 Lookout St		PHONE NO. 250 368-8620	
CITY / TOWN Trail	POSTAL CODE V1R1 3P7	EMAIL (IF AVAILABLE) bcronnie@hotmail.com	
JURISDICTION Warfield			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE) N/A			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) N/A			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) N/A			
FINANCIAL AGENT'S LAST NAME N/A	FIRST NAME	MIDDLE NAME	
FINANCIAL AGENT'S MAILING ADDRESS N/A		PHONE NO.	
CITY / TOWN N/A	POSTAL CODE	EMAIL (IF AVAILABLE)	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) N/A	If there were previous financial agents, complete form 4236.		
<input checked="" 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 type="checkbox"/>	Summary of Election Expenses – Form 4229 <input type="checkbox"/>
Statement of Income and Expenses – Form 4222 <input 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 Ron Joseph	
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 (LECFA)</i> .	
SIGNATURE OF CANDIDATE <i>Ronald Joseph</i>	DATE: (YYYY/MM/DD) <i>2017/03/09</i>
PRINTED NAME OF CANDIDATE RONALD JOSEPH	
SIGNATURE OF FINANCIAL AGENT <i>N/A</i>	DATE: (YYYY/MM/DD)
PRINTED NAME OF FINANCIAL AGENT	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	
NAME OF SAVINGS INSTITUTION <i>N/A</i>	
ADDRESS	

4222 - STATEMENT OF INCOME AND EXPENSES

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
Ron Joseph

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
Ron Joseph

		All Contributions		
	Individuals			
	Corporations			
	Unincorporated Business/Commercial Organizations			
	Trade Unions			
	Non-profit Organizations			
	Other Identifiable Contributors			
	Total	\$	000	A
	Anonymous contributions	\$	00	B
	Total contributions (A + B)	\$	00	C
	Total significant contributions (must equal box A on all forms 4224)	\$	00	
	Total contributions of less than \$100	\$	00	

Number of contributors who gave less than \$100 #

Number of anonymous contributors #

4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

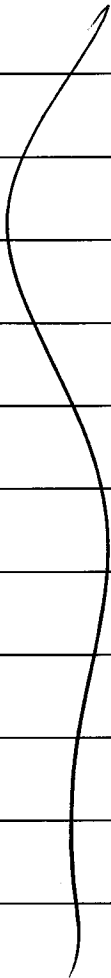
LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Ron Joseph	PAGE <input type="text"/> OF <input type="text"/>
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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



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	
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4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE Ron Joseph	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
INSTRUCTIONS: Complete one sheet for each prohibited campaign contribution received. Attach additional forms if necessary.	

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	N/A				
DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED N/A					
Complete this field if the prohibited campaign contribution was received from an individual:					
NAME OF INDIVIDUAL N/A					
Complete these fields if the prohibited campaign contribution was received from an organization:					
NAME OF ORGANIZATION N/A					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

**4226 - TRANSFERS RECEIVED
FROM ELECTOR ORGANIZATION
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE Ron Joseph	PAGE <input type="text"/>
	OF <input type="text"/>

DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
N/A	N/A	N/A	N/A
TOTAL A			200

*Also include legal name if different than ballot name.

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

This information is collected to administer the *Local Elections Campaign Financing Act*.
Questions? Contact: **Privacy Officer, Elections BC**
1-800-661-8683 PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6

**4227 - OTHER PERMISSIBLE DEPOSITS
TO CAMPAIGN ACCOUNT
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE PAGE
 Ron Joseph OF

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		N/A	
			TOTAL A 000

*TYPE:
 I – Interest
 D – Dividends of shares paid by credit union
 S – Surplus funds from previous election returned by jurisdiction
 F – Fundraising income not reported as a campaign contribution
 O – Other (describe)

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

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4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE Ron Joseph		PAGE <input style="width: 40px;" type="text"/>
DATE OF EVENT (YYYY/MM/DD)		OF <input style="width: 40px;" type="text"/>
DESCRIPTION OF FUNDRAISING EVENT <div style="text-align: center; font-size: 2em; font-family: cursive;">N/A</div>		

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="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>
Total income reported as campaign contributions				<input type="checkbox"/>

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			000	<input type="checkbox"/>

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE

Ron Joseph

Column A

Column B

Election Expenses

Election Proceedings Period Expenses

ADVERTISING

Brochures, pamphlets and flyers
 Internet
 Newspaper, magazine, journal
 Radio
 Signs and billboards
 Television
 Other advertising

417 ⁰⁰

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)

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Total Expenses

A	417 ⁰⁰
---	-------------------

B	0 ⁰⁰
---	-----------------

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.

4231 - OTHER PERMISSIBLE PAYMENTS
FROM CAMPAIGN ACCOUNT
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

Ron Joseph

PAGE

OF

DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		N/A	

TOTAL A

00

* TYPE:

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

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH SHARED ELECTION EXPENSE

NAME OF CANDIDATE Ron Joseph	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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DESCRIPTION OF SHARED EXPENSE <div style="text-align: center; font-size: 2em; font-family: cursive;">N/A</div>

Total value of shared election expense	<input style="width: 100%;" type="text"/>
Candidate's portion of shared election expense*	<input style="width: 100%;" type="text"/>
Amount paid directly to supplier (if applicable)	<input style="width: 100%;" type="text"/>
Amount of reimbursements given to other candidate(s)	<input style="width: 100%;" type="text"/>
Amount of reimbursements received from other candidates	<input style="width: 100%;" type="text"/>

***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
Ron Joseph

PAGE
OF

Transfers between candidate's own campaign accounts in same jurisdiction

PURPOSE	AMOUNT
N/A	

Transfers from candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
	N/A	
TOTAL		A <input type="text"/>

Transfers to candidate's own campaign accounts in other jurisdictions

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
	N/A	
TOTAL		B <input type="text" value="000"/>

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 Ron Joseph

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).

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

DATE (YYYY/MM/DD)	DESCRIPTION	AMOUNT
	N/A	

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE
Ron Joseph

Free advertising provided by jurisdiction

Table with 3 columns: DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD), JURISDICTION, MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.). The table contains one row with 'N/A' handwritten in the third column.

4236 - PREVIOUS FINANCIAL AGENTS
LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE Ron Joseph		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		
FINANCIAL AGENT'S LAST NAME	FIRST NAME	MIDDLE NAME
N/A		
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)