(15/01)

4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE





			Amenament #
CANDIDATE'S FULL NAME			GENERAL VOTING DAY (YYYY/MM/DD)
Robert Proper Balcaen			2017/03/04
BALLOT NAME (IF DIFFERENT FROM ABOVE)		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)	
Bob Balcaen		Councillor	
MAILING ADDRESS			PHONE NO.
PO Box 460			250 569-3121
CITY / TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
McBride		V0J 2E0	
JURISDICTION			
McBride			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE EL	ECTORAL AREA (IF APPLI	CABLE)	
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION	FION (IF APPLICABLE)	, <u>, , , , , , , , , , , , , , , , , , </u>	
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATI	ON (IF APPLICABLE)		
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
D/OFFT TALL			
FINANCIAL AGENT'S MAILING ADDRESS 121			PHONE NO.
Box 460 1248 - 3rd Ave.			
CITY/TOWN McBride, BC VOJ 250	·	POSTAL CODE	EMAIL (IF AVAILABLE)
100 100 200			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
	n nex	were previous financ	ial agents, complete form 4236.
X Tick if candidate acted as their own finance	ial agent	Tick if candidate	was registered as a third party sponsor
This disclosure statement includes the following	j forms:	1	
Declarations and Campaign Accounts	Eorm 4224	Summr	ary of Election Expenses - Form 4229
Decial ations and Campaign Accounts	- 1 OIIII 4221 Y	/ Juliane	ary of Election Expenses — 1 orn 4223
Statement of Income and Expenses	- Form 4222 🔽	Transfers Giver	n to Elector Organization - Form 4230
Output Ou	5 1000 1	04	
Summary of Campaign Contributions by Class	- Form 4223 [V]	Othe	r Permissible Payments - Form 4231
Significant Contributors (\$100 or more)	- Form 4224	S	hared Election Expense - Form 4232
digitification dollaribators (\$100 of more)	101111 4224		mared Election Expense — Torri 4232
Prohibited Campaign Contributions	- Form 4225	Transfers Between Ca	ndidate's Own Accounts - Form 4233
			·
Transfers Received from Elector Organization	- Form 4226	Disburs	ement of Surplus Funds - Form 4234
<u></u>			
Other Permissible Deposits	- Form 4227	Free Adv	ertising from Jurisdiction - Form 4235
Eundraisina Eusatian Tieket Calaa	_ Form #220	D -	covious Financial Agents Form 4335
Fundraising Function Ticket Sales	- rom 4228	Pr	evious Financial Agents - Form 4236

FAX NO. :2505693121

LOCAL ELECTIONS CAMPAIGN FINANCING

(14/08)

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Bob Balcaen	
Declaration: I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement required under the Local Elections Campaign Financing Act (LECFA).	completely and accurately discloses the information
SIGNATURE DE DANDIDATE	DATE: (YYYY/MM/DD)
PRINTED NAME OF CHORERT BALCAEN	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
PRINTED NAME OF FINANCIBERT BALCAEN	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION SCOTIA BANK	
ADDRESS 311-MAIN ST. MCBRID	EBG VOJZEO
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

(14/08)

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Bob Balcaen	
Total value of campaign contributions from all sources (from box C on form 4223)	\$250.00
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)	350.00 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)	241.50 B

FAX NO. :2505693121

LOCAL ELECTIONS CAMPAIGN FINANCING

(14/08)

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Bob Balcaen	
	All Contributions
Individuals	250.00
Corporations	
Unincorporated Business/Commercial Organizations	
Trade Unions	
Non-profit Organizations	
Other Identifiable Contributors	
Total	: 250.00 A
Anonymous contributions	\$ B
Total contributions (A + B)	\$ 250.00 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	#

(15/01)

4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE





NAME OF CANDIDATE				
Bob Balcaen				
	Column A	Column B		
	Election	Election Proceedings		
ADVERTISING	Expenses	Period Expenses		
Brochures, pamphlets and flyers				
Internet				
Newspaper, magazine, journal	241.50			
Radio				
Signs and billboards				
Television		···		
Other advertising				
CAMPAIGN ADMINISTRATION				
Salaries and wages				
Rent, insurance and utilities				
. Courier and postage				
Fumiture and equipment	7117 WALES			
Office supplies				
•				
Professional services				
Other campaign administration expenses				
Conventions and meetings				
Other campaign related functions	- 1,1,1,1,1,1			
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	В		
iorai exhalisas	1241.50	В		
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 proceed	edings period.			

(14/08)

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE		
Bob Balcaen		
		•
	Balance remaining in campaign account(s) after payment of all expenses	8.50 A
	Total amount of campaign contributions from candidate	\$ 250.00 B
Amount reimbursed to ca	andidate from campaign account for the candidate's contributions to their campaign	\$ 8.50 c
	Date of reimbursement to candidate (YYYY/MM/DD)	MAR 31/17
	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
	*	
- L		L