#### **4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT** LOCAL ELECTIONS CANDIDATE



A non-partisan Office of the Legislatu
Amendment #
GENERAL VOTING DAY (YYYY/MM/DD)
2017/07/08
OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
Councillor
PHONE NO.
250 618-3859
EMAIL (IF AVAILABLE)
bruniebrunie@hotmail.com
MIDDLE NAME
250-6183859
brunie brunie @Hot Mail. Pom
agents, complete form 4236.
s registered as a third party sponsor
of Election Expenses - Form 4229
Elector Organization - Form 4230
Permissible Payments - Form 4231
red Election Expense - Form 4232 🗸

CANDIDATE'S FULL NAME			GENERAL VOTING DAY (YYYY/MM/DD)
Brunie Brunie			2017/07/08
BALLOT NAME (IF DIFFERENT FROM ABOVE)		· · · · · · · · · · · · · · · · · · ·	OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
Brunie Brunie			Councillor
MAILING ADDRESS			PHONE NO.
1300 Stewart Ave			250 618-3859
CITY / TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
Nanaimo		V9S 4E1	bruniebrunie@hotmail.com
JURISDICTION			
Nanaimo			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA	(IF APPLI	CABLE)	
		,	
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLIC	ABLE)	· · · · · · · · · · · · · · · · · · ·	
	•		
LEGAL NAME OF ENDORSING ELECTOR OPGANIZATION (IF APPLICA	BLE)		
FINANCIAL AGENT'S LAST NAME FIRST NAME			MIDDLE NAME
BRUNIE BRUI	1/15		WIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS	OIR		PHONE NO.
1300 STEWARD ave			250-618 3859
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
NANAIMO		V95 4E1	brunie brunie @HOT MAIL. POM
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)  2017 5 26	If there	e were previous financia	al agents, complete form 4236.
X Tick if candidate acted as their own financial agent		Tick if candidate w	as registered as a third party sponsor
This disclosure statement includes the following forms:			
Declarations and Campaign Accounts - Form 42	21 🔽	Summai	y of Election Expenses - Form 4229
Statement of Income and Expenses - Form 42	22 🔲	Transfers Given	to Elector Organization - Form 4230 🔽
Summary of Campaign Contributions by Class - Form 422	23 🗸	Other	Permissible Payments - Form 4231
Significant Contributors (\$100 or more) - Form 422	24 🗸	Sh	nared Election Expense - Form 4232
Prohibited Campaign Contributions - Form 42:	25 🗸	Transfers Between Can	didate's Own Accounts - Form 4233
Transfers Received from Elector Organization - Form 422	26 🖊	Disburse	ment of Surplus Funds - Form 4234
Other Permissible Deposits - Form 422	27 📝	Free Adve	rtising from Jurisdiction – Form 4235
Fundraising Function Ticket Sales - Form 422	28 📝	Pre	evious Financial Agents – Form 4236

### 4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Brunie Brunie	(2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Declaration:  I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely a required under the Local Elections Campaign Financing Act (LECFA).	nd accurately discloses the information
SIGNATURE OF CANDIDATE  SHUM, E BHUM, E	DATE: (YYYY/MM/DD) 2017/9/11
Brunie Brunie Brunie Brunie	
SIGNATURE OF FINANCIAL AGENT  BAUNIE BAUNIE  PRINTED NAME OF FINANCIAL AGENT	DATE: (YYYY/MM/DD) 2017 / 9/11
PRINTED NAME OF FINANCIAL AGENT  BRUNIE BRUNIE	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION CODSTOL COMMUNITY CREDIT UNION	/
ADDRESS 220 ~ 59 Wharf STREET, NANAIHO, BC	V9R 2×3
NAME OF SAVINGS INSTITUTION	The state of the s
ADDRESS	
NAME OF SAVINGS INSTITUTION	- <del>110</del>
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

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



NAME OF CANDIDATE		
Brunie Brunie	MANAGEMENT CONTROL OF THE STATE	
Total value of campaign contributions from all sources (from box C on form 4223)	275.	
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)	# 275 -	Α
Election expenses (from box A on form 4229)	#81.95	` .
Transfers to elector organization (from box A on form 4230)		
Total other permissible payments (from box A on form 4231)	31.65	
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)	11.38	
Total Expenditures (sum of above boxes)	524.98	В

### 4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Brunie Brunie		
	All Contributions	_
Individuals	275 -	
Corporations		
Unincorporated Business/Commercial Organizations		
Trade Unions		
Non-profit Organizations		
Other Identifiable Contributors		
Total	\$ 275 -	Α
Anonymous contributions	\$	В
Total contributions (A + B)	\$ 275-	С
Total significant contributions (must equal box A on all forms 4224)	\$ 205,	]
Total contributions of less than \$100	\$ 70 -	]~
Number of contributors who gave less than \$100	# 2	
Number of anonymous contributors	# /	]

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



NAME OF CANDIDATE				PAGE /
Brunie Brunie				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
2017/5/20	BRUNIE BYUNIE		1	/00
2017/6/14	BRUNIE BRUNIE  BRUNIE BRUNIE  BRUNIE BRUNIE		/	80
2017/7/06	BRUNIE BRUNIE		/	25
			,	
				- -
·				
		· .		
	· · · · · · · · · · · · · · · · · · ·			
IF NEEDED, ATTACH A *CLASS OF CONTRIBI 1 - INDIVIDUAL, 2 - C		MMERCIAL ORGANIZATION CONTRIB	TOTAL	A # 205

#### **4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS** LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

IAME OF CANDIDATE Brunie Brunie					PAGE OF
ISTRUCTIONS: Complete one s Attach additiona	heet for each proh al forms if necessa	ibited campaign con ry.	tribution received.		
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	OR ELEC	REMITTED TO
☐ INDIVIDUAL ☐ ORGANIZATION ☐ ANONYMOUS	(YYYY/MM/DD)		(YYYY/MM/DD)	(YYY	Y/MM/DD)
Complete this field if the prohibit	ted campaign cont	ribution was receive	d from an individua		
Complete these fields if the proh	ibited campaign co	ontribution was rece	ived from an organi	zation:	
IAME OF ORGANIZATION	/			CLASS*	
MAILING ADDRESS				1	
IAME OF DIRECTOR		NAME OF DIRE	CTOR		

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



NAME OF CANDIDATE Brunie Brunie			PAGE OF
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

PAGE

NAME OF CANDIDATE

# 4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



#### LOCAL ELECTIONS CANDIDATE

PLEASE PRINT IN BLOCK LETTERS

Brunie Brunie			OF	
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT	
		/ .		
				-
			-	
*TYPE: I – Interest D – Dividends of shares pa S – Surplus funds from pre	aid by credit	TOTAL union	Α	

O - Other (describe)

F – Fundraising income not reported as a campaign contribution

### 4228 - FUNDRAISING FUNCTION TICKET SALES

#### LOCAL ELECTIONS CANDIDATE



SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE				PAGE
Brunie Brunie				OF
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EV	ENT		
			<u>/</u>	
Income reported as campaign c	ontributions	/		
				Tick if Charge per
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Ticket Varies
Purchases by organ	nizations			
Purchases by individuals of m \$250 worth				
Purchases by individuals of that are more than \$				
	Total income reported as	campaign contributions	s	
Remember to report all campaig and if applicable, on form 4224 -			paign Contributio	ns by Class,
Other income not reported as ca	ampaign contributions			
				Tick if Charge per
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Ticket Varies
Purchases by indiv tickets of \$5				

# 4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



Brunie Brunie		
	Column A	Column B
ADVERTISING	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers		
Internet	/	
Newspaper, magazine, journal	/	
Radio	/	
Signs and billboards	47. 75	
Television		
Other advertising	34.72	
CAMPAIGN ADMINISTRATION		
Salaries and wages	28.00	
Rent, insurance and utilities		
Courier and postage		
Furniture and equipment		
Office supplies	50,09	
Professional services	08	
Other campaign administration expenses	813	
Conventions and meetings		
Other campaign related functions	40.00	
Research and polling		
Interest		
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses	34.44	
Interest on loans for election expenses		
Legal and accounting services		
Financial agent services		
and the expenses (describe) 50 Recycled use 15. gws	4250	
Total Expenses	A 513-60	В
lumn A - Report the value of all election expenses for goods and services used in the campaign perio	od.	
lumn B - Report the value of all election expenses for goods and services used in the election proce	edings period.	

## 4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE			PAGE
Brunie Brunie			OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUÉ OF TRANSFER
			,
·			
		*	
*Also include legal name if o	different than ballot name.	TOTAL	A

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



PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Brunie Brunie			PAGE
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
2017/6/31		Monthly Service Bank Fee	7.70
2017/6/30		Monthly Service Bank Fee Monthly Service Fee SIAMTON Cheque Fee	19.95
017 6/16		sintey cheque tee	4.00
		U	
*TYPE:		TOTAL	A 21,65

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





56	<b>ELECTIONS</b> A non-partisan Office of the Leg	BC
	A non-partisan Office of the Leg	gislature

NAME OF CANDIDATE			PAGE
Brunie Brunie			OF
		/	
DESCRIPTION OF SHARED EXPENSE	/		
	Tatal cooking of all ages	I destination	
	Total value of shared	d election expense	
	Candidate's portion of shared	election expense*	
	Candidate's portion of shared	election expense	
	Amount paid directly to sup	oplier (if applicable)	
	,		
	Amount of reimbursements given to	other candidate(s)	
	Amount of reimbursements received from	m other candidates	
*Note: Remember to include your por	tion of the shared expense as an electio	n expense on form 4229 - :	Summary of
Election Expenses.			
	/		
Full names of other candidates with w	nom the expense was snared:		
LAST NAME	FIRST NAME	MIDDLE NAME	
	/		
	<u> </u>		:
/			
/			
			1
		1	

# 4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



#### LOCAL ELECTIONS CANDIDATE

ansfers between candidate's own campaign accounts in same jurisdiction  PURPOSE  AMOUNT  ansfers from candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/IMM/IDD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  TOTAL A  ansfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/IMM/IDD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT	runie Brunie		OF
Insfers from candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  TOTAL A  Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  AMOUNT  AMOUNT	nsfers between can		T
DATE OF TRANSFER (YYYY/MM/DD)  TOTAL A  Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  AMOUNT		PURPOSE	AMOUNT
DATE OF TRANSFER (YYYY/MM/DD)  TOTAL A  Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  AMOUNT			
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  TOTAL A  Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT		·	
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  TOTAL A  Insfers to candidate own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT			
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  TOTAL A  Insfers to candidate own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT			
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT  TOTAL A  Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT			
(YYYY/MM/DD)  TOTAL A  Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT	nsfers from candida	ate's own campaign accounts in other jurisdictions	· • · · · · · · · · · · · · · · · · · ·
Insfers to candidate's own campaign accounts in other jurisdictions  DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT	DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT			
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT			
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DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT			
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT		TOTAL	   A
DATE OF TRANSFER (YYYY/MM/DD)  PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)  AMOUNT	nefare to candidate		
	DATE OF TRANSFER	/	AMOUNT
	, , , , , , , , , , , , , , , , , , , ,		
			·
TOTAL B			
		The amounts in boxes A and B must be carried forward to form 4222.	

### 4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE  Brunie Brunie			
1 14 14 14 14 14 14 14 14 14 14 14 14 14			
	Balance remaining in campaign account(s) after payment of all expenses	# 11,38	А
	Total amount of campaign contributions from candidate	# 205.	В
Amount reimbursed to car	ndidate from campaign account for the candidate's contributions to their campaign	/1.38	С
	Date of reimbursement to candidate (YYYY/MM/DD)	2017 / 7/10	
	Amount of remaining surplus funds (after any reimbursement under box C)	0	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	

## 4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Brunie Brunie		
Free advertising prov	vided by jurisdiction	
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)
		•

### 4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



		*	processor and the second s
NAME OF CANDIDATE			
Brunie Brunie			
Braine Braine			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		,	
EFFECTIVE DATE OF ACTOMITMENT (TTTTTMINITED)		/	
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
BRUNIE	BRUNIE		
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
1700 S40 (500	1-		11/3/5 9
1300 STEWARD 20	/		EMAIL (IF AVAILABLE)  5 HUNIED HUNIE HOT MAIL  6 HOT MAIL  7 HOT MAIL  7 HOT MAIL  8 HOT M
OLTY (TOMB)		POSTAL CODE	EMAIL (IF AVAILABLE)
NANAIMO		1/U951 4E1	BHUDGE DHUDGE CHOUSE
		<u>γ</u>	[* (a.b. (a) (4.0) ( · · · · · · · · · · · · · · · · · ·
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	7		
	<u> </u>		13 13 13 13 13 14 13 13 13 13 13 13 13 13 13 13 13 13 13
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
	/		
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
			,
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
TOTAL CONTRACTOR OF THE CONTRA			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	7 /		1977 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985
			and the second reserve to the second sec
FINANCIAL ACENTIC LACT NAME	FIRST NAME		MIDDLE NAME
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
	/		·
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
<u> </u>			]
OLTY/TOMAN	·····	POSTAL CODE	EMAIL (IF AVAILABLE)
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
THE REPORT OF THE STATE OF THE	1,1101.11,111/2		
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN	,	POSTAL CODE	EMAIL (IF AVAILABLE)
			,
			-97. 3 KJ-NY-800 HOURESTON HERRESTON HERRESTON HOURESTON HOURESTON HOURESTON HERRESTON HERRESTON HERRESTON HER