4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT LOCAL ELECTIONS CANDIDATE



Amendment #	

CANDIDATE'S FULL NAME			GENERAL VOTING DAY (YYYY/MM/DD)
Barbara May Morin			2017/09/30
BALLOT NAME (IF DIFFERENT FROM ABOVE)			OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
Barbara Morin			Councillor
MAILING ADDRESS			PHONE NO.
1558 Hillcrest Ave			250 318-9999
CITY / TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
Kamloops		V2B 7P3	barbmorin@gmail.com
JURISDICTION			
Kamloops			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELE	ECTORAL AREA (IF APPLIC	CABLE)	
DALLOT NAME OF ENDOPONIO EL FOTOR DE CANADA			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZAT	ION (IF APPLICABLE)		
LECAL NAME OF ENDOBONIO ELECTOR ORGANIZATIVA	2N 4E 4DD 1045 E		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION	ON (IF APPLICABLE)		
FINANCIAL AGENT'S LAST NAME	FIRST NAME	· · · · · · · · · · · · · · · · · · ·	MIDDLE NAME
Morin	Cary		J. W.
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.
1558 Hillcrest Ave			250 320-6701
CITY / TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
Kamloops		V2B 7P3	cary9480@gmail.com
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
2017/08/22	if there	e were previous financi	al agents, complete form 4236.
Tick if candidate acted as their own finance	ial agent	Tick if candidate v	was registered as a third party sponsor
This disclosure statement includes the following	ı forms:		
Declarations and Campaign Accounts	- Form 4221	Summa	rry of Election Expenses – Form 4229
Statement of Income and Expenses	- Form 4222	Transfers Given	to Elector Organization - Form 4230
Summary of Campaign Contributions by Class	- Form 4223	Othe	r Permissible Payments - Form 4231
Significant Contributors (\$100 or more)	- Form 4224	Shared Election Expense - Form 42	
Prohibited Campaign Contributions	- Form 4225	Transfers Between Candidate's Own Accounts - Form 423	
Transfers Received from Elector Organization	- Form 4226	Disburse	ement of Surplus Funds - Form 4234
Other Permissible Deposits	- Form 4227	Free Adve	ertising from Jurisdiction - Form 4235
Fundraising Function Ticket Sales	- Form 4228	Pr	evious Financial Agents – Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Barbara Morin	
Declaration: I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accrequired under the Local Elections Campaign Financing Act (LECFA).	curately discloses the information
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD) 2017/10/12
PRINTED NAME OF CANDIDATE BARBARA M. MORIN	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD), 2017/10/12
PRINTED NAME OF FINANCIAL AGENT CARY J. W. MORIN	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION Withdrew I No account opened ADDRESS	and the second s
ADDRESS N(A	
NAME OF SAVINGS INSTITUTION	The state of the s
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
Apply grap A copyright	

4222 - STATEMENT OF INCOME AND EXPENSES LOCAL ELECTIONS CANDIDATE



e of candidate bara Morin	
Total value of campaign contributions from all sources (from box C on form 4223)	.0
Transfers received from elector organization (from box A on form 4226)	0
Total other permissible deposits (from box A on form 4227)	-0
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	Û
Total Income (sum of above boxes)	0
Election expenses (from box A on form 4229)	D
Transfers to elector organization (from box A on form 4230)	4
Transfers to elector organization (from box A on form 4230) Total other permissible payments (from box A on form 4231)	0
· · · · · · · · · · · · · · · · · · ·	0
Total other permissible payments (from box A on form 4231)	0

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Barbara Morin		
	The second secon	
	All Contributions	
Individuals	All Gontinguions	
Corporations	0	
Unincorporated Business/Commercial Organizations	0	
Trade Unions	-0	
Non-profit Organizations	0	
Other Identifiable Contributors	Ð	
Total	\$ 0	Α
Anonymous contributions	\$	В
Total contributions (A + B)	\$ 0	С
Total significant contributions (must equal box A on all forms 4224)	\$ 0	
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				PAGE
Barbara Morin				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
				NIA
				NIA
			·	
				· · · · · · · · · · · · · · · · · · ·
F NEEDED, ATTACH ADDI CLASS OF CONTRIBUTO 1 – INDIVIDUAL, 2 – CORF	TIONAL FORMS R: PORATION, 3 – UNINCORPORATED BUSINESS/CON N-PROFIT ORGANIZATION 6 – OTHER IDENTIFIAE	MERCIAL ORGANIZATION CONTRIB	TOTAL UTIONS	* NOWER

4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE					PAGE
Barbara Morin	XX		· · · · · · · · · · · · · · · · · · ·	·	OF
INSTRUCTIONS: Complete one s Attach addition	heet for each prohibi al forms if necessary		tribution received.		
RECEIVED FROM INDIVIDUAL ORGANIZATION	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
ANONYMOUS		0			
Complete this field if the prohibit	ted campaign contrib	oution was received	d from an individual		
Complete these fields if the proh	ibited campaign con	tribution was recei	ved from an organiz	zation:	
NAME OF ORGANIZATION	10 10 10 10 10 10 10 10 10 10 10 10 10 1		9.000.000 <u>, 10.000</u>		CLASS*
MAILING ADDRESS					

^{*} 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

NAME OF CANDIDATE Barbara Morin			PAGE OF
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
	NIA		4
			-
			-
	_	-	
*Also include legal name if o	different than ballot name.	TOTAL	A

4227 - OTHER PERMISSIBLE DEPOSITS TO CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE

	· P	LEASE PRINT IN BLOCK LETTERS		
NAME OF CANDIDATE Barbara Morin				PAGE OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	АМО	DUNT
		NIA.		9
-				
·				
			· -	
*TYPE: I – Interest D – Dividends of shares	paid by credi		A	3

This form is available for public inspection.

ORIGINAL — ELECTIONS BC
PLEASE KEEP A COPY FOR YOUR RECORDS

O - Other (describe)

S – Surplus funds from previous election returned by jurisdiction **F** – Fundraising income not reported as a campaign contribution

4228 - FUNDRAISING FUNCTION TICKET SALES

LOCAL ELECTIONS CANDIDATE







			PAGE
			OF
UNDRAISING EVEN	Т		
	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
e reported as c	ampaign contributions		
ontributors (\$1	3 - Summary of Cam _l 00 or more).	oaign Contributio	ns by Class, Tick if
mber of	Charge per Ticket	Total Charges Collected	Charge per Ticket Varies
	mber of tets Sold e reported as contributors (\$10)	mber of Charge per Ticket e reported as campaign contributions s on form 4223 - Summary of Campontributors (\$100 or more).	mber of Charge Total Charges Collected e reported as campaign contributions s on form 4223 - Summary of Campaign Contributio ontributors (\$100 or more).

4229 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



	Column A	Column B
	Election	Election Proceedings
DVERTISING	Expenses	Period Expenses
Brochures, pamphlets and flyers	0	J g
Internet	-0	
Newspaper, magazine, journal	9	
Radio	0	
Signs and billboards	0	$] \qquad \qquad \nearrow$
Television	D.	7
Other advertising	-0	Ø
CAMPAIGN ADMINISTRATION		
Salaries and wages	0	
Rent, insurance and utilities	.0	0
Courier and postage	Ø	0
Furniture and equipment	0	-0
Office supplies	-0	
Professional services	-0	\Box
Other campaign administration expenses	-6	
Conventions and meetings	0	
Other campaign related functions	.0	S A
Research and polling	-0	0
Interest		0
EXCLUSIONS THAT MUST BE REPORTED		
Personal election expenses	8	
Interest on loans for election expenses	-0	l e
Legal and accounting services	8	$oxed{\Box}$
Financial agent services	8	8
Other expenses (describe)	110.16	
	NONE	None
		1
Total Expenses	A O	B

4230 - TRANSFERS GIVEN TO ELECTOR ORGANIZATION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Barbara Morin			PAGE
DATE OF TRANSFER (YYYY/MM/DD)	BALLOT NAME OF ELECTOR ORGANIZATION*	DESCRIPTION (IF NON-MONETARY)	VALUE OF TRANSFER
			.0
<u>.</u>			
		·	
		40 J	
			· · · · · · · · · · · · · · · · · · ·
Also include legal name if	different than ballot name.	TOTAL	A NONE

4231 - OTHER PERMISSIBLE PAYMENTS FROM CAMPAIGN ACCOUNT



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

NAME OF CANDIDATE Barbara Morin			PAGE OF
DATE (YYYY/MM/DD)	TYPE*	DESCRIPTION	AMOUNT
		None	0
*TYPE: B – Bank fees E – Intended election expen F – Payments made for fund	ise that wa	TOTAL as not used urgoses	A D

N - Nomination deposit O - Other (describe) NAME OF CANDIDATE

4232 - SHARED ELECTION EXPENSE

LOCAL ELECTIONS CANDIDATE





36	ELECTIONS A non-partisan Office of the Leg	84
	A non-partisan Office of the Leg	jislature

NAME OF CANDIDATE			PAGE
Barbara Morin			OF
DESCRIPTION OF SHARED EXPENSE	.) .		
1	NIA		
	Total value of shared e	lection expense	<i>(</i>)-
	, , , , , , , , , , , , , , , , , , , ,		.0
	Candidate's portion of shared ele	ection expense*	<i></i>
	Amount paid directly to suppl	lier (if applicable)	9
	Amount of reimbursements given to o	ther candidate(s)	8
	Amount of reimbursements received from	other candidates	8
Election Expenses. Full names of other candidates with	whom the expense was shared:		
Full names of other candidates with	whom the expense was shared:	MIDDLE	NAME
Full names of other candidates with		MIDDLE	E NAME
Full names of other candidates with		MIDDLE	NAME
Full names of other candidates with		MIDDLE	E NAME
Full names of other candidates with		MIDDLE	E NAME
Full names of other candidates with		MIDDLE	E NAME
Full names of other candidates with		MIDDLE	E NAME
Full names of other candidates with		MIDDLE	ENAME
Full names of other candidates with		MIDDLE	ENAME
Full names of other candidates with		MIDDLE	E NAME
Full names of other candidates with		MIDDLE	ENAME
Full names of other candidates with			ENAME

4233 - TRANSFERS BETWEEN CANDIDATE'S OWN CAMPAIGN ACCOUNTS



LOCAL ELECTIONS CANDIDATE
PLEASE PRINT IN BLOCK LETTERS

accounts in same jurisdiction PURPOSE I A Counts in other jurisdictions USE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT AMOUNT AMOUNT
PURPOSE	.0
ounts in other jurisdictions	.0
ounts in other jurisdictions	AMOUNT
	AMOUNT
SE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
IA .	0
TOTAL	A 6
nts in other jurisdictions	
	AMOUNT
IA	
· · · · · · · · · · · · · · · · · · ·	
TOTAL	B <i>f</i> ×
)	Ints in other jurisdictions DEE (INCLUDE NAME OF OTHER JURISDICTION) TOTAL Xes A and B must be carried forward to form 4222.

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE		
Barbara Morin		
		· · · · · · · · · · · · · · · · · · ·
	Balance remaining in campaign account(s) after payment of all expenses	8 A
	Total amount of campaign contributions from candidate	A B
Amount reimbursed to ca	andidate from campaign account for the candidate's contributions to their campaign	e c
	Date of reimbursement to candidate (YYYY/MM/DD)	8
	Amount of remaining surplus funds (after any reimbursement under box C)	8 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
	NA	-0
		2
		4

4235 - FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE				
Barbara Morin				
Free advertising provided by jurisdiction				
DATE ADVERTISING WAS TRANSMITTED (YYYY/MM/DD)	JURISDICTION	MEANS OF TRANSMISSION (WEBSITE, FLYER, ETC.)		
	NIA	0		
·				
		·		

4236 - PREVIOUS FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE



		10 11	
NAME OF CANDIDATE		7 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	
Barbara Morin			
Dai Dai a Moțiii			
EFFECTIVE DATE OF APPOINTMENT OCCUMANDO	1		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
<u> </u>			
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
		1	
	\		
	1		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	\sim		
FINANCIAL AGENT'S LAST NAME	FIRST NAME	######################################	MIDDLE NAME
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
			<u></u>
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
Citt/10viiv	No.	1	
	<u> </u>		
	7		
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
			1
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
			, ,
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			196 gye (1966)
FINANCIAL AGENT'S LAST NAME	FIRST NAME	regger running stærkijt († 1900) -	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)