4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

LOCAL ELECTIONS CANDIDATE



TEACE THE I			Amendment #
CANDIDATE'S FULL NAME			GENERAL VOTING DAY (YYYY/MM/DD)
Gavin Harlan Thomas			2017/10/21
BALLOT NAME (IF DIFFERENT FROM ABOVE)	<u> </u>		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.)
Gavin Thomas			Councillor
MAILING ADDRESS	<u></u>		PHONE NO.
506 6th St S			250 919-5533
CITY/TOWN	,;;;;,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	POSTAL CODE	EMAIL (IF AVAILABLE)
Cranbrook		V1Q1L1	gavinthomas@hotmail.com
JURISDICTION			
Cranbrook			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELE	CTORAL AREA (IF APPLIC	ABLE)	
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION	ON (IF APPLICABLE)		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATIO	N (IF APPLICABLE)	-	
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME
FINANCIAL AGENT'S MAILING ADDRESS	wiid i		PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
*			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
	Ir mere	were previous iliian	cial agents, complete form 4236.
X Tick if candidate acted as their own financial	al agent	Tick if candidate	was registered as a third party sponsor
This disclosure statement includes the following	forms:		×
Declarations and Campaign Accounts	- Form 4221 🔀	Sumn	nary of Election Expenses - Form 4229
Statement of Income and Expenses	- Form 4222 🔀	Transfers Give	en to Elector Organization - Form 4230
Summary of Campaign Contributions by Class	- Form 4223 🔀	Oth	ner Permissible Payments - Form 4231
Significant Contributors (\$100 or more)	- Form 4224 ⊠		Shared Election Expense - Form 4232
Prohibited Campaign Contributions	- Form 4225	Transfers Between C	andidate's Own Accounts - Form 4233
Transfers Received from Elector Organization	- Form 4226	Disbu	sement of Surplus Funds - Form 4234
Other Permissible Deposits	- Form 4227	Free Ad	vertising from Jurisdiction - Form 4235
Fundraising Function Ticket Sales	- Form 4228	i	Previous Financial Agents - Form 4236

4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Gavin Thomas	
Declaration:	
, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement complete equired under the Local Elections Campaign Financing Act (LECFA).	ly and accurately discloses the information
SIGNATURE OF CANDIDATE	DATE: (YYYY/MM/DD) 2017/11/23
PRINTED NAME OF CANDIDATE Gavin Thomas	
SIGNATURE OF FINANCIAL AGENT	DATE: (YYYY/MM/DD)
PRINTED NAME OF FINANCIAL AGENT	
Campaign accounts:	
NAME OF SAVINGS INSTITUTION Scotiabant	
ADDRESS 524 Cranbrook St. V Cranbrook BC	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

4222 - STATEMENT OF INCOME AND EXPENSES

LOCAL ELECTIONS CANDIDATE



in Thomas	
Total value of campaign contributions from all sources (from box C on form 4223)	2000.00
Transfers received from elector organization (from box A on form 4226)	Ø
Total other permissible deposits (from box A on form 4227)	9
Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	Ø
Total Income (sum of above boxes)	2000-66
Election expenses (from box A on form 4229)	14/2.80
Transfers to elector organization (from box A on form 4230)	Ø
Total other permissible payments (from box A on form 4231)	8
Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	ð
Amount of surplus funds disbursed (from box A on form 4234)	587.20
Total Expenditures (sum of above boxes)	2000.00

4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Gavin Thomas		
	All Contributions	ì
Individuals	2000-00	
Corporations		
Unincorporated Business/Commercial Organizations	9	
Trade Unions	Ø	
Non-profit Organizations	Ø	
Other Identifiable Contributors	Ø	
Total	\$ 2000.00	A
Anonymous contributions	\$	В
Total contributions (A + B)	s 2000.00	С
Total significant contributions (must equal box A on all forms 4224)	s 2000.0°	- Incomment
Total contributions of less than \$100	\$]
Number of contributors who gave less than \$100	# 0	
Number of anonymous contributors	# 0	

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



	<u> </u>			· · · · · · · · · · · · · · · · · · ·			1		
DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL N (For cla full n	AME OF CONT iss 2, 3, 4, 5 & ames of two di	RIBUTOR 6, include rectors)		ADDRESS OF CON (For class 2, 3, 4,	ITRIBUTOR 5 & 6 only)	CLASS*	CON	ALUE OF TRIBUTION
2017/69/14	Gasin	Harlan	Thomas				/	20	00.00
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4229 - SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE



overtising	Column A	
VEDTICING		Column B
	Election Expenses	Election Proceedings Period Expenses
Brochures, pamphlets and flyers	a	Tenou Expenses
Internet	565.41	
Newspaper, magazine, journal	0	-
Radio	208.95	
Signs and billboards	634.49	
Television	0 9 7 . 47	
Other advertising	e	
MPAIGN ADMINISTRATION	~	
Salaries and wages	A	
Rent, insurance and utilities		
Courier and postage	\overline{D}	-
Furniture and equipment		
Office supplies		
Professional services		***************************************
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions	(F)	
Research and polling		
Interest	a d	
CLUSIONS THAT MUST BE REPORTED		
Personal election expenses	72	
la de la companya de	0	
Interest on loans for election expenses Legal and accounting services	0	
Financial agent services		
ner expenses (describe)	2 95	
Bank tee	5, 93	
		<u> </u>
Total Expenses	A 1412.80	В
Total Expenses	A 1412.80	

4234 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE		
Gavin Thomas		·
	Balance remaining in campaign account(s) after payment of all expenses	587.20 A
	Total amount of campaign contributions from candidate	2000 · ° B
Amount reimbursed to	candidate from campaign account for the candidate's contributions to their campaign	587.20 c
	Date of reimbursement to candidate (YYYY/MM/DD)	587.20 c
	Amount of remaining surplus funds (after any reimbursement under box C)	D D
If the amount in Bo	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
8		
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