4300 - DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE



				ENERAL VOTING DAY (YYYY/MM/) 2018/10/20
ANDIDATE'S FULL NAME	<u></u>		BALLOT NAME (IF DIFFERENT)	
indy Nadine Solda			Cindy Solda	
CANDIDATE'S MAILING ADDRESS			PHONE NO.	19 10 10 10 10 10 10 10 10 10 10 10 10 10
39 Gertrude St			250-731-6715	
ITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	
ort Alberni	ВС	V9Y 6L1	cindysolda@me.com	
JRISDICTION		3.0-32.4 XXX. (Hella XXII (H.S. 1)	OFFICE SOUGHT	
Port Alberni			Councillor	
LECTION AREA Port Alberni ALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF	APPLICA	BLE)		
EGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF D	DIFFEREN	NT)		
Tick if candidate is their own financial agent		Т	k if candidate was also a thi	rd party sponsor
NANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)			EFFECTIVE DATE OF APPOINT	TMENT (YYYY/MM/DD)
NANCIAL AGENT'S MAILING ADDRESS	00-100 N		PHONE NO.	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	
CERO CAMPAIGN ACTIVITY Candidates with zero campaign activity may file this form or pplicable to the campaign. No income or deposits, including funds from the cand previous elections, transfers, etc. No expenses, including signs reused from previous e Did not have a campaign account. Did not change financial agents during this election. Did not receive any free election advertising from the	didate, co	ontributions, donati	ons, gifts, loans, funds from t fees, etc.	Tick if candidate had zero campaign activity
IOTE - ENDORSED CANDIDATES MUST ALSO	7.5			NANCING ARRANGEMEN
ECLARATION: the undersigned, declare that to the best of my knowledged in the local Elections Campaign Financing Actions Campaign Financing Actions	ge and be	ellef, this disclosur	e statement completely and ac	curately discloses the informatio
The state of the s	. 9 12 J. 18 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	SIGNATU	IRE OF FINANCIAL AGENT	
IGNATURE OF CANDIDATE ATÉ (YYYY (MM/DD)				

4301 - CAMPAIGN FINANCING SUMMARY LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Dindy Solda	
Value of campaign contributions from all sources (box A on Form 4302)	<u> </u>
Amount of all permissible loans received (box B on Form 4304)	æ Ø
Other deposits into campaign account and in-kind transfers (box A on Form 4305)	X
TOTAL INFLOWS (sum of above boxes)	ঠ
Election period expenses (box A on Form 4307)	<u> X</u>
Campaign period expenses (box B on Form 4307)	æ
Exclusions from election period expenses (box D on Form 4307)	Ø
Exclusions from campaign period expenses (box E on Form 4307)	>
Other payments from campaign account and in-kind transfers (box A on Form 4309)	\$
Amount of surplus funds disbursed (box A on Form 4311)	8
TOTAL OUTFLOWS (sum of above boxes)	×
ampaign Account(s)	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	St. Ashibitation 27 S. F. A
ADDRESS	,

4302 - SUMMARY OF CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



mpaign contributions include monetary and in-k	ind co	ontribution	s.		
impaign contributions from the candidate must be not include anonymous contributions with cont	(FB) 12-14-14-14	C#, N.J 10.67 - 21.7 - 1811 1	BDTET #OT Seven HT - 트	ther sourc	es.
Number of contributors who gave less than \$100	#	0	Total contributions of less than \$100	\$	4
Number of anonymous contributors	#	0	Anonymous contributions	\$	
		Significan	t contributions (box A from Form 4303)	\$	
			TOTAL CONTRIBUTIONS	.	

4303 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE) LOCAL ELECTIONS CANDIDATE



ch additional forms if necessary.	general angles of the state of			
FULL NAME OF CONTRIBUTOR (List only one name per contribution)	DATE OF CONTRIBUTION (YYYY/MM/DD)	\$ VALUE OF CONTRIBUTION	RESIDENTIAL ADDRESS OF CONTRIBUTOR	
]			
	,			
	SUBTOTAL OF THIS PAGE			
TOTAL	CONTRIBUTIONS LL FORM(S) 4303	A		

4304 - PERMISSIBLE LOANS RECEIVED LOCAL ELECTIONS CANDIDATE



		PA	GE
Cindy Solda			OF
	ssible loan received. Attach additional fo ite must be disclosed in the same way as		
OAN			la d
NAME OF LENDER			
RESIDENTIAL ADDRESS OF LENDER*	/\/\/	4	
OAN DETAILS			
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYY) (MM/DD)	\$ ORIGINAL AMOUNT OF LOAN	•
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE %	PRIME RATE** %	<u> </u>
eport all loan payments as other p	payments from campaign account on Fo	rm 4309.	
NAME OF LENDER			
/	1		
RESIDENTIAL ADDRESS OF LENDER*			
OAN DETAILS	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN	
OAN DETAILS DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD) LOAN INTEREST RATE %	\$ ORIGINAL AMOUNT OF LOAN PRIME RATE** %	
OAN DETAILS DATE RECEIVED (YYYY/MM/DD) \$ AMOUNT OF LOAN OUTSTANDING		PRIME RATE** %	
RESIDENTIAL ADDRESS OF LENDER* OAN DETAILS DATE RECEIVED (YYYY/MM/DD) \$ AMOUNT OF LOAN OUTSTANDING Report all loan payments as other payments.	LOAN INTEREST RATE %	PRIME RATE** %	

*RESIDENTIAL ADDRESS:
REQUIRED FOR INDIVIDUAL LENDERS ONLY

**PRIME RATE OF INTEREST:

REQUIRED FOR LOANS FROM SAVING INSTITUTIONS - AVAILABLE ON ELECTIONS BC WEBSITE

4305 - OTHER DEPOSITS INTO CAMPAIGN ACCOUNT AND IN-KIND TRANSFERS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Cindy Solda		PAGE	
[]	at are not campaign contributions or loans. These include fundraising income, trans or organization (including in-kind transfers), funds from previous elections, return of d dividends. Attach additional forms if necessary.	of ters between the deposits (e.g., damag	je
DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT	
			
·			
Name of the Control o			
i	TOTAL		Α

4306 - PROHIBITED CAMPAIGN CONTRIBUTIONS AND LOANS LOCAL ELECTIONS CANDIDATE



Cindy Solda					PAGE
Complete one entry for each prohib	ited campaign contrik	oution or loan recei	ved. Attach additio	nal forms if	
PROHIBITED CONTRIBUTION					
RECEIVED FROM	DATE RECEIVED	\$ VALUE	DATE RETURNED	OR	DATE REMITTED TO ELECTIONS BC
INDIVIDUAL ORGANIZATION	(YYYX/MM/DD)		(YYYY/MM/DD)		(YYYY/MM/DD)
ANONYMOUS	N. Carlotte				
DESCRIPTION OF HOW THE PROHIBITED CO	ONTRIBUTION WAS RECEIV	ED			
FULL NAME OF INDIVIDUAL OR ORGANIZATI	ON				A CONTRACTOR OF THE STATE OF TH
TO THE PARTY OF TH		\			
ADDRESS OF ORGANIZATION, IF APPLICABLE	_E				
The state of the s					
					380834 - 10 10 10 10 10 10 10 10 10 10 10 10 10
PROHIBITED LOAN					
PROHIBITED LOAN DESCRIPTION OF HOW THE PROHIBITED LO	DANIWAS RECEIVED	200 () 1 to this contract			DATE URNED TO LENDER
	DAN WAS RECEIVED				DATE URNED TO LENDER (YYYY/MM/DD)
	DAN WAS RECEIVED				URNED TO LENDER
	DAN WAS RECEIVED				URNED TO LENDER
DESCRIPTION OF HOW THE PROHIBITED LO	DAN WAS RECEIVED DATE DUE (YYYY)	(/MM/DD)	\$ ORIGINA		URNED TO LENDER (YYYY/MM/DD)

*PRIME RATE OF INTEREST:
REQUIRED FOR LOANS FROM SAVING INSTITUTIONS – AVAILABLE ON ELECTIONS BC WEBSITE

4307 - SUMMARY OF ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



2	NAME OF CANDIDATE	
	Cindy Solda	
	Election Period Expenses - Report the value of all goods and s	
	Campaign Period Expenses - Report the value of all goods and	
Û	If goods and services were used in both periods, report the ful	n amount used in both columns (e.g., campaign signs).

ADVERTISING		ELECTION PERIOD EXPENSES (JANUARY 1 - SEPTEMBER 21, 2018)	CAMPAIGN PERIOD EXPENSES (SEPTEMBER 22 – OCTOBER 20, 2018)
	Signs and billboards		
	Value of reused signs		
	Brochures, pamphlets and flyers		
	Newspaper, magazine and journal	Marine Ma	
	Internet		
	Radio		
그리 발생을 당한다고 하는데 	Television		
	Other advertising		
CAMPAIGN ADMINISTRATION			
	Bank fees		
	Courier and postage		
	Rent, insurance and utilities		
	Furniture and equipment		
	Office supplies		
	Salaries and wages		
	Professional services		
	er campaign administration expenses		
	Conventions and meetings		
	Other campaign related functions		
	Research and polling		
	Interest	1.00	
Other expenses (describe)			
	TOTAL EXPENSES	\ <u>A</u>	В
	CAMPAIGN	PERIOD EXPENSE LIMIT	\$7,720.64 C
EXCLUSIONS THAT MUST BE REPORTED		ELECTION PERIOD EXCLUSIONS	CAMPAIGN PERIOD EXCLUSIONS
	Personal election expenses	A CONTRACTOR OF THE CONTRACTOR	
	Financial agent services	1	
	Legal and accounting services	V.C.	
<u>In</u>	iterest on loans for election expenses	V 1715A W 1715A 1715B 17	
	항하고 기계 기계 이 기계 하고 있다. 프로젝터 및 경영 (홍홍) 프로젝트 전경 (-) () 기계		
	TOTAL EXCLUSIONS	D	E

4308 - SHARED ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



Campaign period. Use a separate for the total value of all shared election expenses in the applicable column for each period. Use a separate for the unique group of candidates that shared election expenses. ELECTION PERIOD CAMPAIGN PERIOD (SEPTEMBER 22 – OCTOBE Total value of shared election expenses Candidate's portion of shared election expenses Amount paid to supplier(s) (if applicable) terensure only your portion of shared election expenses is reported on Form 4307. Exide the full names of other candidates the election expenses were shared with and the amounts of reimburser received from other candidates for their portion or given to other candidates for your portion. ELECTION PERIOD CAMPAIGN PERIOD CAMPAIGN PERIOD CAMPAIGN PERIOD Amount of reimbursen	AGE OF
Total value of shared election expenses Candidate's portion of shared election expenses Amount paid to supplier(s) (if applicable) te -ensure only your portion of shared election expenses is reported on Form 4307. Evide the full names of other candidates the election expenses were shared with and the amounts of reimbursel ner received from other candidates for their portion or given to other candidates for your portion. ELECTION PERIOD CAMPAIGN PERIOD FULL NAME(S) OF OTHER CANDIDATE(S) Amount of reimbursement Amount of reimbursement	حيات
Total value of shared election expenses Candidate's portion of shared election expenses Amount paid to supplier(s) (if applicable) te -ensure only your portion of shared election expenses is reported on Form 4307. Evide the full names of other candidates the election expenses were shared with and the amounts of reimbursel ner received from other candidates for their portion or given to other candidates for your portion. ELECTION PERIOD CAMPAIGN PERIOD FULL NAME(S) OF OTHER CANDIDATE(S) Amount of reimbursement Amount of reimbursement	<u> </u>
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rounder the full names of other candidates the election expenses were shared with and the amounts of reimburses ner received from other candidates for their portion or given to other candidates for your portion. ELECTION PERIOD CAMPAIGN PERIOD	
received from other candidates for their portion or given to other candidates for your portion. ELECTION PERIOD CAMPAIGN PERIO FULL NAME(S) OF OTHER CANDIDATE(S) Amount of reimbursement Amount of reimbursement	
FULL NAME(S) OF OTHER CANDIDATE(S) Amount of reimbursement Amount of reimbursement	ements
FULL NAME(S) OF OTHER CANDIDATE(S)	OD
\$ Given \$ Received \$ Given \$ R	ment
	Received

4309 - OTHER PAYMENTS FROM CAMPAIGN ACCOUNT



AND IN-KIND TRANSFERS	A non-partisan Office of the Legislat
LOCAL ELECTIONS CANDIDATE	- Person Const Control Lagrana

NAME OF CANDIDATE Cindy Solda		, F	PAGE
Report all outflows from the camp	aign that are not disclosed on other forms. These include t g in-kind transfers), fundraising expenses, payment of depo election expenses that were not used and payments of pro	ansfers between the ca sits (e.g., nomination a hibited contributions. A	of ndidate
DATE (YYYY/MM/DD)	DESCRIPTION	\$ AM	OUNT
			F18-13-14-1
		TOTAL	А

4310 - FUNDRAISING FUNCTION LOCAL ELECTIONS CANDIDATE



						PAGE
complete a separate form for each function.						
DATE OF FUNCTION (YYYY/MM/DD) DESCRIPTION OF F	UNDRAISING FUNCTION	ON (IF JO	DINT FUNCTION 1	IST OTHE	R CANDIDATE(S))	
DATE OF FORCTION (TTTT/MINISB)	014517/101140110110110	511 (II UC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
A – FUNDRAISING INCOME REPORTED AS C						
All income reported as campaign contributions mu	ist also de includ	ea on i	-orm 4302 and	і, іт арр		
TICKET SALES (includes function entry fees)	NUMBER OF TICKETS SOLD #		CHARGE PER TICKET \$		TOTAL CHARGES COLLECTED \$	TICK IF CHARGE PER TICKET VARIE
Purchases by eligible individuals of more than \$50 worth of tickets		x [Ψ			
Number of eligible individuals that purchased tickets		y divîna Balindê				
OTHER CAMPAIGN CONTRIBUTIONS i.e., goods and services that are donated for the funct	ion or sold at the f	unction	for more than	their ma	rket value)	
DESCRIPTION			<u> </u>		\$ VALUE	303 million more as a dar
	The state of the s			SYCE BOOK		
	A C CAMBAIGN	СОИТ	RIBUTIONS			
B FUNDRAISING INCOME <u>NOT</u> REPORTED All income <u>not</u> reported as campaign contributions r TICKET SALES (includes function entry fees)	nust also be inclu	\			TOTAL	TICK IF
All income <u>not</u> reported as campaign contributions r		\	CHARGE PER TICKET		TOTAL CHARGES COLLECTED	CHARGE PER
All income <u>not</u> reported as campaign contributions r	n ust also be incl u NUMBER OF	\	CHARGE		CHARGES	CHARGE PER
All income <u>not</u> reported as campaign contributions in TICKET SALES (includes function entry fees) Purchases by eligible individuals of \$50 or less worth of tickets	nust also be inclu NUMBER OF TICKETS SOLD	ded on	CHARGE PER TICKET] = [CHARGES COLLECTED	CHARGE PER
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4311 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



	Balance remaining in campaign	account(s) after payment of all expe	enses
	The state of the s		
		of campaign contributions from cand	
If the candidate made from the balance rema	campaign contributions of money lining in the campaign account. En	to their own campaign, they can be ter the payment to the candidate be	paid back for those amounts
	DATE		
$\sqrt{\lambda}$	(YYYY/MM/DD)	\$ AMOUNT	
			penses, and the candidate I
If the amount remaini	ing in the campaign account is \$5	oo ordinore arter payment or an ex	
been paid back (if ap	plicable), the funds must be paid :	to the urisdiction where the candi gn account is less than \$500 skip	date ran for election. Enter
been paid back (if ap	olicable), the funds must be paid amount remaining in the campai	to the turisdiction where the cand	date ran for election. Enter
been paid back (if ap	plicable), the funds must be paid amount remaining in the campai	to the urisdiction where the candi gn account is less than \$500 skip	date ran for election. Enter
been paid back (if app payment below, if the	olicable), the funds must be paid amount remaining in the campaid DATE (YYYY/MM/DD)	to the urisdiction where the candign account is less than \$500 skip	date ran for election. Enter this section and go to C.
been paid back (if appropriet the payment below, if the lift the amount remains candidate has been p	olicable), the funds must be paid amount remaining in the campaid (YYYY/MM/DD) ng in the campaign account is less aid back (if applicable), the funds	to the urisdiction where the candign account is less than \$500 skip \$ AMOUNT as than \$500 after the payment of a must be disbursed as directed by	date ran for election. Enter this section and go to C.
lf the amount remaini candidate has been paid back (if appayment below, if the	olicable), the funds must be paid amount remaining in the campaid (YYYY/MM/DD)	to the urisdiction where the candign account is less than \$500 skip \$ AMOUNT as than \$500 after the payment of a must be disbursed as directed by	date ran for election. Enter this section and go to C.
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If the amount remaini candidate has been p disbursement below.	olicable), the funds must be paid amount remaining in the campaid (YYYY/MM/DD) The campaign account is less aid back (if applicable), the funds including a description of how the	s than \$500 after the payment of a must be disbursed as directed by e funds were disbursed.	date ran for election. Enter this section and go to C. all expenses, and the the candidate. Enter this
been paid back (if appayment below, if the If the amount remains candidate has been paid below,	olicable), the funds must be paid amount remaining in the campaid (YYYY/MM/DD) The campaign account is less aid back (if applicable), the funds including a description of how the	s than \$500 after the payment of a must be disbursed as directed by e funds were disbursed.	date ran for election. Enter this section and go to C. all expenses, and the the candidate. Enter this

NAME OF CANDIDATE

4312 - FORMER FINANCIAL AGENTS AND FREE ADVERTISING FROM JURISDICTION LOCAL ELECTIONS CANDIDATE



CRIMER FINANCIAL AGENTS Inter the information below for any former financial agents during this election. Do not enter financial agent information fro revious elections, or the name of the candidate if they previously acted as their own financial agent. EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) FINANCIAL AGENTS FULL NAME FINANCIAL AGENTS MAILING ADDRESS CITY/TOWN PORT Alberni BC PROV POSTAL CODE EMAIL (IF AVAILABLE) cindysolda@me.com FINANCIAL AGENTS FULL NAME FINANCIAL AGENTS FULL NAME FINANCIAL AGENTS MAILING ADDRESS CITY/TOWN PROV POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) PROV PROV PROV POSTAL CODE EMAIL (IF AVAILABLE) PROV PROV PROV PROV PROV PROV PROV				
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INANCIAL AGENT'S MAILING ADDRESS PROV. POSTAL CODE EMAIL (IF AVAILABLE) COPY Alberni PROV. POSTAL CODE EMAIL (IF AVAILABLE) CINANCIAL AGENT'S FULL NAME INANCIAL AGENT'S MAILING ADDRESS PROV. POSTAL CODE EMAIL (IF AVAILABLE) CINANCIAL AGENT'S MAILING ADDRESS PROV. POSTAL CODE EMAIL (IF AVAILABLE) PROV. POSTAL CODE EMAIL (IF AVAILABLE) CITY/TOWN PROV. POSTAL CODE EMAIL (IF AVAILABLE) REE ADVERTISING FROM JURISDICTION eport free election advertising provided by the jurisdiction where the candidate ran. Note -candidate profiles on jurisdiction websites of election advertising. on not include free media coverage such as news articles or interviews.		1		경기 전환 경기 전기 전기 전환 경기 전환 경기 전환 경기 전환 경기 기계 교육이다. 1일 기계 경기로 교육하고 있다면 보고 있다
INANCIAL AGENT'S MAILING ADDRESS PROV. POSTAL CODE EMAIL (IF AVAILABLE) CORT Alberni PROV. POSTAL CODE EMAIL (IF AVAILABLE) CINDYSOID (ITY/TOWN) INANCIAL AGENT'S FULL NAME INANCIAL AGENT'S MAILING ADDRESS PROV. POSTAL CODE EMAIL (IF AVAILABLE) ITY/TOWN PROV. POSTAL CODE EMAIL (IF AVAILABLE) REE ADVERTISING FROM JURISDICTION Report free election advertising provided by the jurisdiction where the candidate ran. Note - candidate profiles on jurisdiction websites of election advertising. To not include free media coverage such as news articles or interviews.				
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250-731-6715 ITY/TOWN POOR Alberni PROV. POSTAL CODE EMAIL (IF AVAILABLE) cindysolda@me.com FFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) INANCIAL AGENT'S FULL NAME INANCIAL AGENT'S MAILING ADDRESS PROV. POSTAL CODE EMAIL (IF AVAILABLE) ITY/TOWN PROV. POSTAL CODE EMAIL (IF AVAILABLE) REE ADVERTISING FROM JURISDICTION eport free election advertising provided by the jurisdiction where the candidate ran. Note - candidate profiles on jurisdiction websites to election advertising. On not include free media coverage such as news articles or interviews.	INANO(AL ACENTIC MAILING APPRECA		\	Injury vo
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