

**4300 - DISCLOSURE STATEMENT COVER PAGE**  
**LOCAL ELECTIONS CANDIDATE**



GENERAL VOTING DAY (YYYY/MM/DD) 2018/10/20			
CANDIDATE'S FULL NAME Cindy Nadine Solda		BALLOT NAME (IF DIFFERENT) Cindy Solda	
CANDIDATE'S MAILING ADDRESS 5289 Gertrude St		PHONE NO. 250-731-6715	
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y 6L1	EMAIL (IF AVAILABLE) cindysolda@me.com
JURISDICTION Port Alberni		OFFICE SOUGHT Councillor	
ELECTION AREA Port Alberni			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)			
<input checked="" type="checkbox"/> Tick if candidate is their own financial agent		<input type="checkbox"/> Tick if candidate was also a third party sponsor	
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)		EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)
<b>ZERO CAMPAIGN ACTIVITY</b>			<input checked="" type="checkbox"/> Tick if candidate had zero campaign activity
Candidates with zero campaign activity may file this form only. If any of the conditions <b>are not met</b> , file other forms applicable to the campaign.			
1. No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc. 2. No expenses, including signs reused from previous elections, campaign account fees, etc. 3. Did not have a campaign account. 4. Did not change financial agents during this election. 5. Did not receive any free election advertising from their jurisdiction (see Form 4312 for description).			
<b>NOTE - ENDORSED CANDIDATES MUST ALSO INCLUDE A COPY OF THEIR CAMPAIGN FINANCING ARRANGEMENT.</b>			
<b>DECLARATION:</b>			
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the <i>Local Elections Campaign Financing Act</i> .			
SIGNATURE OF CANDIDATE 		SIGNATURE OF FINANCIAL AGENT	
DATE (YYYY/MM/DD) 2018/10/21		DATE (YYYY/MM/DD)	
<b>WARNING:</b> Signing a false declaration is a serious offence and is subject to significant penalties.			

# 4301 - CAMPAIGN FINANCING SUMMARY

## LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Cindy Solda
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Value of campaign contributions from all sources (box A on Form 4302)		X
Amount of all permissible loans received (box B on Form 4304)		X
Other deposits into campaign account and in-kind transfers (box A on Form 4305)		X
<b>TOTAL INFLOWS</b> (sum of above boxes)		X
Election period expenses (box A on Form 4307)		X
Campaign period expenses (box B on Form 4307)		X
Exclusions from election period expenses (box D on Form 4307)		X
Exclusions from campaign period expenses (box E on Form 4307)		X
Other payments from campaign account and in-kind transfers (box A on Form 4309)		X
Amount of surplus funds disbursed (box A on Form 4311)		X
<b>TOTAL OUTFLOWS</b> (sum of above boxes)		X

<b>Campaign Account(s)</b>	
NAME OF SAVINGS INSTITUTION	N/A
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

**4302 - SUMMARY OF CAMPAIGN CONTRIBUTIONS**  
**LOCAL ELECTIONS CANDIDATE**



NAME OF CANDIDATE

Cindy Solda

**Campaign contributions include monetary and in-kind contributions.**  
**Campaign contributions from the candidate must be reported in the same way as contributions from other sources.**  
**Do not include anonymous contributions with contributions less than \$100.**

Number of contributors who gave less than \$100

#

Total contributions of less than \$100

\$

Number of anonymous contributors

#

Anonymous contributions

\$

Significant contributions (box A from Form 4303)

\$

**TOTAL CONTRIBUTIONS**

\$ <input type="text" value="2"/>	<b>A</b>
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**4303 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)**  
**LOCAL ELECTIONS CANDIDATE**



NAME OF CANDIDATE Cindy Solda	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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**Attach additional forms if necessary.**

FULL NAME OF CONTRIBUTOR (List only one name per contribution)	DATE OF CONTRIBUTION (YYYY/MM/DD)	\$ VALUE OF CONTRIBUTION	RESIDENTIAL ADDRESS OF CONTRIBUTOR
<b>SUBTOTAL OF THIS PAGE</b>			
<b>TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303</b>			<b>A</b>

**4304 - PERMISSIBLE LOANS RECEIVED**  
**LOCAL ELECTIONS CANDIDATE**



NAME OF CANDIDATE Cindy Solda	PAGE <input style="width: 20px;" type="text"/> OF <input style="width: 20px;" type="text"/>
<b>Complete one entry for each permissible loan received. Attach additional forms if necessary.</b> <b>Permissible loans from the candidate must be disclosed in the same way as permissible loans from other sources.</b>	

<b>LOAN</b>			
NAME OF LENDER			
RESIDENTIAL ADDRESS OF LENDER*			
<i>N/A</i>			
<b>LOAN DETAILS</b>			
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN	<b>A</b>
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE %	PRIME RATE** %	
<b>Report all loan payments as other payments from campaign account on Form 4309.</b>			

<b>LOAN</b>			
NAME OF LENDER			
RESIDENTIAL ADDRESS OF LENDER*			
<b>LOAN DETAILS</b>			
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN	<b>A</b>
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE %	PRIME RATE** %	
<b>Report all loan payments as other payments from campaign account on Form 4309.</b>			

<b>TOTAL AMOUNT OF ALL LOANS RECEIVED</b> (Sum of all boxes A on Form(s) 4304)	<b>B</b>
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**\*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 <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
<b>Report all inflows that are not campaign contributions or loans. These include fundraising income, transfers between the candidate and elector organization (including in-kind transfers), funds from previous elections, return of deposits (e.g., damage deposit), interest and dividends. Attach additional forms if necessary.</b>	

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
<b>TOTAL</b>		<b>A</b>

This form is available for public inspection.  
PLEASE KEEP A COPY FOR YOUR RECORDS

This information is collected under the authority of the Local Elections Campaign Financing Act and the Freedom of Information and Protection of Privacy Act. The information will be used to administer provisions under the Local Elections Campaign Financing Act. Questions can be directed to: Privacy Officer, Elections BC 1-800-661-8683, privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6.

**4306 - PROHIBITED CAMPAIGN CONTRIBUTIONS AND LOANS**  
**LOCAL ELECTIONS CANDIDATE**



NAME OF CANDIDATE Cindy Solda	PAGE <input style="width: 20px;" type="text"/> OF <input style="width: 20px;" type="text"/>
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**Complete one entry for each prohibited campaign contribution or loan received. Attach additional forms if necessary.**

**PROHIBITED CONTRIBUTION**

RECEIVED FROM <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION <input type="checkbox"/> ANONYMOUS	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	<b>OR</b>	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED					
FULL NAME OF INDIVIDUAL OR ORGANIZATION					
ADDRESS OF ORGANIZATION, IF APPLICABLE					

**PROHIBITED LOAN**

DESCRIPTION OF HOW THE PROHIBITED LOAN WAS RECEIVED <i>MA</i>	DATE RETURNED TO LENDER (YYYY/MM/DD)	
NAME OF LENDER		
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN
LOAN INTEREST RATE %	PRIME RATE* %	

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

# 4307 - SUMMARY OF ELECTION EXPENSES

## LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE

Cindy Solda

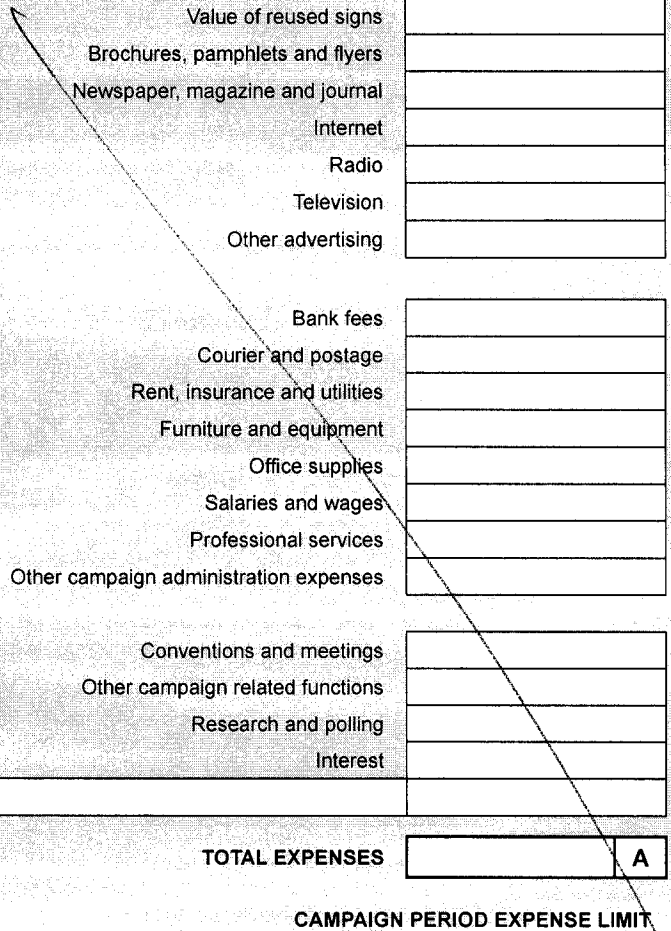
**Election Period Expenses** - Report the value of all goods and services used in the election period.

**Campaign Period Expenses** - Report the value of all goods and services used in the campaign period.

If goods and services were used in both periods, report the full amount used in both columns (e.g., campaign signs).

	ELECTION PERIOD EXPENSES (JANUARY 1 – SEPTEMBER 21, 2018)	CAMPAIGN PERIOD EXPENSES (SEPTEMBER 22 – OCTOBER 20, 2018)
<b>ADVERTISING</b>		
Signs and billboards	<input type="text"/>	<input type="text"/>
Value of reused signs	<input type="text"/>	<input type="text"/>
Brochures, pamphlets and flyers	<input type="text"/>	<input type="text"/>
Newspaper, magazine and journal	<input type="text"/>	<input type="text"/>
Internet	<input type="text"/>	<input type="text"/>
Radio	<input type="text"/>	<input type="text"/>
Television	<input type="text"/>	<input type="text"/>
Other advertising	<input type="text"/>	<input type="text"/>
<b>CAMPAIGN ADMINISTRATION</b>		
Bank fees	<input type="text"/>	<input type="text"/>
Courier and postage	<input type="text"/>	<input type="text"/>
Rent, insurance and utilities	<input type="text"/>	<input type="text"/>
Furniture and equipment	<input type="text"/>	<input type="text"/>
Office supplies	<input type="text"/>	<input type="text"/>
Salaries and wages	<input type="text"/>	<input type="text"/>
Professional services	<input type="text"/>	<input type="text"/>
Other campaign administration expenses	<input type="text"/>	<input type="text"/>
Conventions and meetings	<input type="text"/>	<input type="text"/>
Other campaign related functions	<input type="text"/>	<input type="text"/>
Research and polling	<input type="text"/>	<input type="text"/>
Interest	<input type="text"/>	<input type="text"/>
Other expenses (describe)	<input type="text"/>	<input type="text"/>
<b>TOTAL EXPENSES</b>	<input type="text"/> <b>A</b>	<input type="text"/> <b>B</b>
	<b>CAMPAIGN PERIOD EXPENSE LIMIT</b>	<input type="text"/> <b>\$7,720.64 C</b>
<b>EXCLUSIONS THAT MUST BE REPORTED</b>		
Personal election expenses	<input type="text"/>	<input type="text"/>
Financial agent services	<input type="text"/>	<input type="text"/>
Legal and accounting services	<input type="text"/>	<input type="text"/>
Interest on loans for election expenses	<input type="text"/>	<input type="text"/>
<b>TOTAL EXCLUSIONS</b>	<input type="text"/> <b>D</b>	<input type="text"/> <b>E</b>

N/A





## 4308 - SHARED ELECTION EXPENSES

### LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE  
 Cindy Solda

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**Report the total value of all shared election expenses in the applicable column for each period. Use a separate form for each unique group of candidates that shared election expenses. Attach additional forms if necessary.**

	ELECTION PERIOD (JANUARY 1 – SEPTEMBER 21, 2018)	CAMPAIGN PERIOD (SEPTEMBER 22 – OCTOBER 20, 2018)
Total value of shared election expenses	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
Candidate's portion of shared election expenses	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
Amount paid to supplier(s) (if applicable)	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>

**Note - ensure only your portion of shared election expenses is reported on Form 4307. Provide the full names of other candidates the election expenses were shared with and the amounts of reimbursements either received from other candidates for their portion or given to other candidates for your portion.**

FULL NAME(S) OF OTHER CANDIDATE(S)	ELECTION PERIOD		CAMPAIGN PERIOD	
	Amount of reimbursement		Amount of reimbursement	
	\$ Given	\$ Received	\$ Given	\$ Received
Nik				

**4309 - OTHER PAYMENTS FROM CAMPAIGN ACCOUNT  
AND IN-KIND TRANSFERS**  
LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE

Cindy Solda

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Report all outflows from the campaign that are not disclosed on other forms. These include transfers between the candidate and elector organization (including in-kind transfers), fundraising expenses, payment of deposits (e.g., nomination and damage deposit), loan payments, intended election expenses that were not used and payments of prohibited contributions. Attach additional forms if necessary.

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
TOTAL		A

*WIK*

## 4310 - FUNDRAISING FUNCTION

### LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Cindy Solda	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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**Complete a separate form for each function.**

DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING FUNCTION (IF JOINT FUNCTION, LIST OTHER CANDIDATE(S))
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**A – FUNDRAISING INCOME REPORTED AS CAMPAIGN CONTRIBUTIONS**  
 All income reported as campaign contributions must also be included on Form 4302 and, if applicable, Form 4303.

TICKET SALES (includes function entry fees)	NUMBER OF TICKETS SOLD	CHARGE PER TICKET	TOTAL CHARGES COLLECTED	TICK IF CHARGE PER TICKET VARIES
	#	\$	\$	✓
Purchases by eligible individuals of more than \$50 worth of tickets	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="checkbox"/>
Number of eligible individuals that purchased tickets	<input style="width: 95%; height: 25px;" type="text"/>			

**OTHER CAMPAIGN CONTRIBUTIONS**  
 (i.e., goods and services that are donated for the function or sold at the function for more than their market value)

DESCRIPTION	\$ VALUE

**B – FUNDRAISING INCOME NOT REPORTED AS CAMPAIGN CONTRIBUTIONS**  
 All income not reported as campaign contributions must also be included on Form 4305.

TICKET SALES (includes function entry fees)	NUMBER OF TICKETS SOLD	CHARGE PER TICKET	TOTAL CHARGES COLLECTED	TICK IF CHARGE PER TICKET VARIES
	#	\$	\$	✓
Purchases by eligible individuals of \$50 or less worth of tickets	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="checkbox"/>
Number of eligible individuals that purchased tickets	<input style="width: 95%; height: 25px;" type="text"/>			

**OTHER INCOME NOT REPORTED AS CAMPAIGN CONTRIBUTIONS**  
 (i.e., goods and services sold at the function for their market value or less)

DESCRIPTION	\$ VALUE

**C – COST OF FUNCTION**

The total cost of all fundraising functions must also be included on Form 4309.

The cost of a fundraising function includes goods and services such as food, drinks, prizes, decorations, venue rental, advertising, staffing, entertainment, etc.

\$ TOTAL COST OF FUNCTION

# 4311 - DISBURSEMENT OF SURPLUS FUNDS

## LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Cindy Solda
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Balance remaining in campaign account(s) after payment of all expenses  **A**

Total amount of campaign contributions from candidate

**A** If the candidate made campaign contributions of money to their own campaign, they can be paid back for those amounts from the balance remaining in the campaign account. Enter the payment to the candidate below and go to B.

DATE (YYYY/MM/DD)	\$ AMOUNT

**B** If the amount remaining in the campaign account is \$500 or more after payment of all expenses, and the candidate has been paid back (if applicable), the funds must be paid to the jurisdiction where the candidate ran for election. Enter the payment below. If the amount remaining in the campaign account is less than \$500 skip this section and go to C.

DATE (YYYY/MM/DD)	\$ AMOUNT

**C** If the amount remaining in the campaign account is less than \$500 after the payment of all expenses, and the candidate has been paid back (if applicable), the funds must be disbursed as directed by the candidate. Enter this disbursement below, including a description of how the funds were disbursed.

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT

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



NAME OF CANDIDATE Cindy Solda
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**FORMER FINANCIAL AGENTS**

Enter the information below for any former financial agents during this election. Do not enter financial agent information from previous elections, or the name of the candidate if they previously acted as their own financial agent.

EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S FULL NAME			
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO. 250-731-6715
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y1G1	EMAIL (IF AVAILABLE) cindysolda@me.com

EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S FULL NAME			
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)

**FREE ADVERTISING FROM JURISDICTION**

Report free election advertising provided by the jurisdiction where the candidate ran. Note - candidate profiles on jurisdiction websites are not election advertising. Do not include free media coverage such as news articles or interviews.

MEANS OF TRANSMISSION (NEWSPAPER, FLYER, ETC.)