

4300 - DISCLOSURE STATEMENT COVER PAGE
LOCAL ELECTIONS CANDIDATE



GENERAL VOTING DAY (YYYY/MM/DD)
 2018/10/20

CANDIDATE'S FULL NAME Connie Linda Watts			BALLOT NAME (IF DIFFERENT) Connie Watts	
CANDIDATE'S MAILING ADDRESS 5239 Hector Rd			PHONE NO. 250-723-0029	
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y 9G1	EMAIL (IF AVAILABLE) conniewattslivingdesign@gmail.com	
JURISDICTION SD70 - Alberni School District			OFFICE SOUGHT Board of Education Trustee	
ELECTION AREA Trustee Election Area 2				

BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)

LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)

Tick if candidate is their own financial agent Tick if candidate was also a third party sponsor

FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN) Denise R Martineau			EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) 2018/09/14	
FINANCIAL AGENT'S MAILING ADDRESS 2838 7th Ave			PHONE NO. 250-731-9944	
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y 2J4	EMAIL (IF AVAILABLE) islanddm@telus.net	

ZERO CAMPAIGN ACTIVITY
 Candidates with zero campaign activity may file this form only. If any of the conditions are not met, file other forms applicable to the campaign.

<ol style="list-style-type: none"> No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc. No expenses, including signs reused from previous elections, campaign account fees, etc. Did not have a campaign account. Did not change financial agents during this election. Did not receive any free election advertising from their jurisdiction (see Form 4312 for description). 	<input type="checkbox"/> Tick if candidate had zero campaign activity
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NOTE - ENDORSED CANDIDATES MUST ALSO INCLUDE A COPY OF THEIR CAMPAIGN FINANCING ARRANGEMENT.

DECLARATION:

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 *Local Elections Campaign Financing Act*.

SIGNATURE OF CANDIDATE 	SIGNATURE OF FINANCIAL AGENT
DATE (YYYY/MM/DD) 2018/12/07	DATE (YYYY/MM/DD) 2018/12/07

WARNING: Signing a false declaration is a serious offence and is subject to significant penalties.

4301 - CAMPAIGN FINANCING SUMMARY

LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE <i>Connie Watts</i>
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Value of campaign contributions from all sources (box A on Form 4302)	<i>400.-</i>
Amount of all permissible loans received (box B on Form 4304)	
Other deposits into campaign account and in-kind transfers (box A on Form 4305)	
TOTAL INFLOWS (sum of above boxes)	
Election period expenses (box A on Form 4307)	
Campaign period expenses (box B on Form 4307)	
Exclusions from election period expenses (box D on Form 4307)	
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)	
TOTAL OUTFLOWS (sum of above boxes)	<i>400.-</i>

Campaign Account(s)	
NAME OF SAVINGS INSTITUTION	<i>Bank of Martineau</i>
ADDRESS	<i>7585 Pacific Rim Hwy. Port Alberni</i>
NAME OF SAVINGS INSTITUTION	
ADDRESS	

4302 - SUMMARY OF CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE <div style="font-size: 1.5em; font-family: cursive; margin-left: 20px;">Connie Watts</div>
<p>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.</p>

Number of contributors who gave less than \$100	#	1	Total contributions of less than \$100	\$	50.-
Number of anonymous contributors	#		Anonymous contributions	\$	
Significant contributions (box A from Form 4303)			\$	350.-	
TOTAL CONTRIBUTIONS			\$	400	A

4304 - PERMISSIBLE LOANS RECEIVED LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Connie Watts	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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**Complete one entry for each permissible loan received. Attach additional forms if necessary.
Permissible loans from the candidate must be disclosed in the same way as permissible loans from other sources.**

LOAN		
NAME OF LENDER		
RESIDENTIAL ADDRESS OF LENDER*		
LOAN DETAILS		
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN A
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE %	PRIME RATE** %

Report all loan payments as other payments from campaign account on Form 4309.

LOAN		
NAME OF LENDER		
RESIDENTIAL ADDRESS OF LENDER*		
LOAN DETAILS		
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN A
\$ AMOUNT OF LOAN OUTSTANDING	LOAN INTEREST RATE %	PRIME RATE** %

Report all loan payments as other payments from campaign account on Form 4309.

TOTAL AMOUNT OF ALL LOANS RECEIVED (Sum of all boxes A on Form(s) 4304)	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

4306 - PROHIBITED CAMPAIGN CONTRIBUTIONS AND LOANS
LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Connie Watts	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" 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	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION <input type="checkbox"/> ANONYMOUS					

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	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

Connie Watts

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)
ADVERTISING		
Signs and billboards		<i>436.80</i>
Value of reused signs		
Brochures, pamphlets and flyers		
Newspaper, magazine and journal		<i>93.50</i>
Internet		
Radio		
Television		
Other advertising		
CAMPAIGN ADMINISTRATION		
Bank fees		
Courier and postage		
Rent, insurance and utilities		
Furniture and equipment		
Office supplies		
Salaries and wages		
Professional services		
Other campaign administration expenses		
Conventions and meetings		
Other campaign related functions		
Research and polling		
Interest		
Other expenses (describe)		
TOTAL EXPENSES	A	<i>530.30</i> B
CAMPAIGN PERIOD EXPENSE LIMIT		<i>10,158.88</i> C
EXCLUSIONS THAT MUST BE REPORTED	ELECTION PERIOD EXCLUSIONS	CAMPAIGN PERIOD EXCLUSIONS
Personal election expenses		
Financial agent services		
Legal and accounting services		
Interest on loans for election expenses		
TOTAL EXCLUSIONS	D	E

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



NAME OF CANDIDATE Connie Watts	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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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

4310 - FUNDRAISING FUNCTION LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE Connie Watts	PAGE <input style="width: 30px;" type="text"/> OF <input style="width: 30px;" 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
	#	\$	\$	<input checked="" type="checkbox"/>
Purchases by eligible individuals of more than \$50 worth of tickets	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="checkbox"/>
Number of eligible individuals that purchased tickets	<input style="width: 95%;" 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
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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
	#	\$	\$	<input checked="" type="checkbox"/>
Purchases by eligible individuals of \$50 or less worth of tickets	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="checkbox"/>
Number of eligible individuals that purchased tickets	<input style="width: 95%;" 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
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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 Connie Watts

Balance remaining in campaign account(s) after payment of all expenses

-130.30	A
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Total amount of campaign contributions from candidate

130.30

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 Connie Watts

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 2838 7th Ave			PHONE NO. 250-723-0029
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y 9G1	EMAIL (IF AVAILABLE) conniewattslivingdesign@gmail.com
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S FULL NAME			
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.
Port Alberni			250-731-9944
CITY/TOWN Port Alberni	PROV. BC	POSTAL CODE V9Y 2J4	EMAIL (IF AVAILABLE) islanddm@telus.net

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.)	