# 4300 - DISCLOSURE STATEMENT COVER PAGE

#### LOCAL ELECTIONS CANDIDATE

**ELECTIONS BC** A non-partisan Office of the Legislature

Amendment # \_\_\_\_\_

					GENERAL VOTING DAY (YYYY/MM/DD) 2020/04/04
CANDIDATE'S FULL NAME Keith James Rosenberg			BALLOT NAME (IF DIFFERENT) Keith Rosenberg		
				<b>.</b>	
CANDIDATE'S MAILING ADDRESS				PHONE NO.	
102-921 North Park St				(778) 350-4232	
CITY/TOWN	PROV.	POSTAL		EMAIL (IF AVAILABLE)	
Victoria	BC	V8T	1C4	keith@keithrosenberg	g.ca
JURISDICTION				OFFICE SOUGHT	
Victoria				Councillor	
ELECTION AREA					
Victoria					
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION	(IF APPL	CABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (I	F DIFFEF	RENT)			
Tick if candidate is their own financial agent	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)			EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)		
Cassie Kimberly Hooker			2020/02/28		
FINANCIAL AGENT'S MAILING ADDRESS			PHONE NO.		
102-921 North Park St			(778) 533-4232		
CITY/TOWN PROV. POSTAL CODE		EMAIL (IF AVAILABLE)			
Victoria BC V8T 1C4		1C4	ms.word.wizard@gm	ail.com	
ZERO CAMPAIGN ACTIVITY Candidates with zero campaign activity may file this form or	ıly. If any	of the cor	nditions <b>a</b> i	<b>re not met</b> , file other forms	
applicable to the campaign.	idata aa	atuiku ti a a	o donatio	una aifta laana funda fran	
<ol> <li>No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc.</li> <li>No expenses, including signs reused from previous elections, campaign account fees, etc.</li> <li>Did not have a campaign account.</li> <li>Did not change financial agents during this election.</li> <li>Did not receive any free election advertising from their jurisdiction (see Form 4312 for description).</li> </ol>					
NOTE-ENDORSED CANDIDATES MUSTALS	OINCL	UDEA	COPYC	FTHEIR CAMPAIGN	INANCINGARRANGEMENT.
<b>DECLARATION:</b> I, the undersigned, declare that to the best of my knowledge required under the <i>Local Elections Campaign Financing A</i>	·	elief, this c	disclosure	e statement completely and a	accurately discloses the information
SIGNATURE OF CANDIDATE			SIGNATI	RE OF FINANCIAL AGENT	
Keith Rosenberg				Hooker	
DATE (YYYY/MM/DD)				YYY/MM/DD)	
2020/07/01			2020/0 <sup>-</sup>		
2020/07/01			2020/0		
WARNING: Signing a false declaration is a serious offenc	e and is	subiect to	significa	nt penalties.	

# 4301 - CAMPAIGN FINANCING SUMMARY LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE

Value of campaign contributions from all sources (box A on Form 4302)       0         Amount of all permissible loans received (box B on Form 4304)       0         Other deposits into campaign account and in-kind transfers (box A on Form 4305)       0         TOTAL INFLOWS (sum of above boxes)       0         Election period expenses (box A on Form 4307)       0         Campaign period expenses (box B on Form 4307)       0
Other deposits into campaign account and in-kind transfers (box A on Form 4305)       0         TOTAL INFLOWS (sum of above boxes)       0         Election period expenses (box A on Form 4307)       0
TOTAL INFLOWS (sum of above boxes)       0         Election period expenses (box A on Form 4307)       0
Election period expenses (box <b>A</b> on Form <b>4307</b> )
Campaign period expenses (box <b>B</b> on Form <b>4307</b> )
Exclusions from election period expenses (box <b>D</b> on Form <b>4307</b> )
Exclusions from campaign period expenses (box E on Form 4307)
Other payments from campaign account and in-kind transfers (box <b>A</b> on Form <b>4309</b> )
Amount of surplus funds disbursed (box A on Form 4311)
TOTAL OUTFLOWS (sum of above boxes) 0

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

# 4302 - SUMMARY OF CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE         Campaign contributions include monetary and in-k         Campaign contributions from the candidate must b         Do not include anonymous contributions with cont	be reported in the s	-	ther sources.
Number of contributors who gave less than \$100	# 0	Total contributions of less than \$100	\$ 0
Number of anonymous contributors	# 0	Anonymous contributions	\$ 0
	Significant c	ontributions (box <b>A</b> from <b>Form 4303</b> )	\$ 0

TOTAL CONTRIBUTIONS

\$

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Α 0

# 4303 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)

#### LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE

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
n/a			
	SUBTOTAL OF THIS PAGE	0	
TOTAL C FROM AL	CONTRIBUTIONS LL FORM(S) 4303	<b>A</b>	

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.

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PAGE OF

### 4304 - PERMISSIBLE LOANS RECEIVED LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE					
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			
\$ 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					
n/a					
RESIDENTIAL ADDRESS OF LENDER*					
n/a					
LOAN DETAILS					
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)	\$ ORIGINAL AMOUNT OF LOAN			
\$ 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)

0 B

\*RESIDENTIAL ADDRESS: REQUIRED FOR INDIVIDUAL LENDERS ONLY

\*\*PRIME RATE OF INTEREST:

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

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# 4305 - OTHER DEPOSITS INTO CAMPAIGN ACCOUNT AND IN-KIND TRANSFERS



LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE	PAGE	
	OF	
Report all inflows that are not campaign contributions or loans. These include fundraising income, transfers between	n 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.

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT	
	n/a		0
	TOTAL	0	A

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# 4306 - PROHIBITED CAMPAIGN CONTRIBUTIONS AND LOANS LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE PAGE					
L					OF
Complete one entry for each prohi	bited campaign contri	ibution or loan receiv	ed. Attach additional	forms if necessa	ry.
PROHIBITED CONTRIBUTION					
	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR ELEC	REMITTED TO CTIONS BC Y/MM/DD)
ANONYMOUS					
DESCRIPTION OF HOW THE PROHIBITED	CONTRIBUTION WAS RECE	IVED	·		
FULL NAME OF INDIVIDUAL OR ORGANIZATION					
ADDRESS OF ORGANIZATION, IF APPLICABLE					
L					
PROHIBITED LOAN					
DESCRIPTION OF HOW THE PROHIBITED	LOAN WAS RECEIVED			DATE RETURNED TO (YYYY/MM	) LENDER
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

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# 4307 - SUMMARY OF ELECTION EXPENSES

#### LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE

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).

ADVERTISING	ELECTION PERIOD EXPENSES	CAMPAIGN PERIOD EXPENSES
Signs and billboards	0	0
Value of reused signs		
Brochures, pamphlets and flyers		
Newspaper, magazine and journal		
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	<b>A</b> 0	0 <b>B</b>
	PERIOD EXPENSE LIMIT	\$27,416.40 <b>C</b>
CAMPAIGN		\$27,416.40 <b>C</b>
EXCLUSIONS THAT MUST BE REPORTED	ELECTION PERIOD EXCLUSIONS	CAMPAIGN PERIOD EXCLUSIONS
Personal election expenses	0	0
Financial agent services		
Legal and accounting services		
Interest on loans for election expenses		
TOTAL EXCLUSIONS	0 <b>D</b>	0 <b>E</b>

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# 4308 - SHARED ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE

OF OF

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	CAMPAIGN PERIOD
Total value of shared election expenses	0	0
Candidate's portion of shared election expenses	0	0
Amount paid to supplier(s) (if applicable)	0	0

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.

ELECTIO	N PERIOD	CAMPAIG	IN PERIOD	
Amount of re	eimbursement	Amount of reimbursement		
\$ Given	\$ Received	\$ Given	\$ Received	
	Amount of re	Amount of reimbursement           \$ Given         \$ Received	Amount of reimbursement Amount of re	

# 4309 - OTHER PAYMENTS FROM CAMPAIGN ACCOUNT AND IN-KIND TRANSFERS



LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE	PAGE	
	OF	

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
	n/a	(
L	TOTAL	0 A

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# 4310 - FUNDRAISING FUNCTION

### LOCAL ELECTIONS CANDIDATE

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NAME OF CANDIDATE						PAGEOF
Complete a separate form for each function.						
DATE OF FUNCTION (YYYY/MM/DD) DESCRIPTION OF FUNCTION OF FUNCTIONO	JNDRAISING FUNCT	ON (IF	JOINT FUNCTION, LI	ST OTH	ER CANDIDATE(S))	
A – FUNDRAISING INCOME REPORTED AS CA				, if app		
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	#	x	\$	] =	\$	
Number of eligible individuals that purchased tickets						
OTHER CAMPAIGN CONTRIBUTIONS (i.e., goods and services that are donated for the function DESCRIPTION	on or sold at the f	unctic	on for more than t	neir ma	arket value) \$ VALUE	
B – FUNDRAISING INCOME NOT REPORTED	AS CAMPAIGN	CON	TRIBUTIONS			
All income <u>not</u> reported as campaign contributions m						
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	#	x	φ	=	φ	
Number of eligible individuals that purchased tickets						
OTHER INCOME <u>NOT</u> REPORTED AS CAMPAIGN C (i.e., goods and services sold at the function for their m						
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

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# 4311 - DISBURSEMENT OF SURPLUS FUNDS LOCAL ELECTIONS CANDIDATE



NAME OF CANDIDATE							
	Balance remaining in campaign account(s) after payment of all expenses						A
			Total amount c	of campaign contributions from cano	lidate		
Α	If the candidate from the balance	e made can ce remainir	npaign contributions of money t ng in the campaign account. Ent	o their own campaign, they can be er the payment to the candidate be	paid bac low and	ck for those amounts go to B.	
			DATE (YYYY/MM/DD)	\$ AMOUNT			
В	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			
С	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			\$ AMOUNT			
		n/a					0
-							_

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



NAME OF CANDIDATE

#### 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					
n/a					
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NO.			
CITY/TOWN	PROV. POSTAL CODE	EMAIL (IF AVAILABLE)			
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.)

n/a