

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

GENERAL VOTING DAY (YYYY/MM/DD)  
**2022/10/15**

CANDIDATE'S FULL NAME <b>Christine Thompson</b>		BALLOT NAME (IF DIFFERENT) <b>Christi Thompson</b>	
CANDIDATE'S MAILING ADDRESS <b>586 N. Fletcher Rd</b>		PHONE NUMBER <b>604-340-6300</b>	
CITY/TOWN <b>Gibsons</b>	PROV. <b>BC</b>	POSTAL CODE <b>V0N 1V9</b>	EMAIL (IF AVAILABLE) <b>christie.thompson@mgmt.com</b>
JURISDICTION <b>GIBSONS</b>		OFFICE SOUGHT <b>Town Councillor</b>	
ELECTION AREA <b>Gibson S</b>			

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)		EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NUMBER	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)

**ZERO CAMPAIGN ACTIVITY**

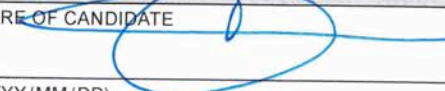
Candidates with zero campaign activity may file this form only. If any of the conditions are not met, file other forms applicable to the campaign.

- 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.

Tick if candidate had zero campaign activity

**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 <b>N/A</b>
DATE (YYYY/MM/DD) <b>2022/10/18</b>	DATE (YYYY/MM/DD)

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

Please submit your report to Elections BC: [electoral.finance@elections.bc.ca](mailto:electoral.finance@elections.bc.ca)

**CAMPAIGN FINANCING SUMMARY**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE

Christi Thompson

**INCOME**

Value of campaign contributions from all sources (box A, Form 4302)

\$3750 -

Amount of all permissible loans received (box B, Form 4304)

-

Other income and transfers received (box A, Form 4305)

-

**TOTAL INCOME** (sum of above boxes)

\$3750 -

**EXPENSES**

Election period expenses (box A, Form 4307)

-

Campaign period expenses (box B, Form 4307)

\$3537.10

Election period expenses not subject to limits (box D, Form 4307)

-

Campaign period expenses not subject to limits (box E, Form 4307)

-

Other expenses and transfers given (box A, Form 4309)

-

Balance remaining in campaign account(s) after payment of all expenses (box A, Form 4311)

212.90

**TOTAL EXPENSES** (sum of above boxes)

\$3750 -

**Campaign Account(s)**

NAME OF SAVINGS INSTITUTION

Royal Bank of Canada

ADDRESS

Fraser Valley Banking Center #101-8411 200<sup>th</sup> St, Langley BC V2Y 0E7

NAME OF SAVINGS INSTITUTION

ADDRESS

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

NAME OF CANDIDATE

Christi Thompson

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

# 0

Total contributions of less than \$100

\$ 0

Number of anonymous contributors

# 0

Anonymous contributions

\$ 0

Total value of contributions of \$100 or more (box A, Form 4303)

\$ 3750 -

**TOTAL CONTRIBUTIONS**

\$ 3750 -

**A**

**CAMPAIGN CONTRIBUTIONS WITH A TOTAL VALUE OF \$100 OR MORE**  
**LOCAL ELECTIONS CANDIDATE**

**4303**  
(22/03)

NAME OF CANDIDATE Christi Thompson PAGE 1  
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Attach additional forms if necessary.

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				DATE RECEIVED (YYYY/MM/DD)	CONTRIBUTION AMOUNT	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	ADDRESS	CITY	PROV.	POSTAL CODE			
Christi Thompson	[REDACTED]				2022 09/29	\$3750	1
<b>SUBTOTAL OF THIS PAGE</b>						<b>3750-</b>	
<b>TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303</b>						<b>3750-</b>	<b>A</b>

This form is available for public inspection.  
Addresses will be obscured.  
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: 1-800-661-9663, privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J8

**PERMISSIBLE LOANS RECEIVED**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE

Christi Thompson

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OF 1

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 (IF INDIVIDUAL)

**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 on Form 4309.

**LOAN**

NAME OF LENDER

RESIDENTIAL ADDRESS OF LENDER (IF INDIVIDUAL)

**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 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 SAVINGS INSTITUTIONS – AVAILABLE ON ELECTIONS BC WEBSITE

**OTHER INCOME AND TRANSFERS RECEIVED**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE

Christi Thompson

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OF 1

Report all transfers received and income that are not campaign contributions or loans on this form.

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
	NONE	
TOTAL		0
		A

NAME OF CANDIDATE <div style="font-size: 1.2em; color: blue; margin-left: 100px;">Christi Thompson</div>	PAGE <input style="width: 20px;" type="text" value="1"/> OF <input style="width: 20px;" type="text" value="1"/>
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**Complete one entry for each prohibited campaign contribution or loan received. Attach additional forms if necessary.**

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					

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 SAVINGS INSTITUTIONS – AVAILABLE ON ELECTIONS BC WEBSITE

**SUMMARY OF ELECTION EXPENSES**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE

Christi Thompson

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**

Commercial canvassing in person, by telephone, or over the internet		
Newspapers and periodicals		\$ 507.95
Promotional materials, including newsletters, brochures, buttons and novelty items		1379.00
Radio		
Search engine marketing and optimization		
Signs		1270.50
Value of reused signs		
Social media		
Television		
Website displays		
Other expenses (describe)	∅	

**CAMPAIGN ADMINISTRATION**

Accounting services		
Bank charges		
Conventions, workshops and meetings		
Donations and gifts		
Fundraising functions		
Furniture and equipment		
Interest expense		
Office rent, utilities, insurance and maintenance		
Office supplies and stationary		
Postage and courier		\$ 379.65
Professional services		
Research and data, including election surveys and polls		
Salaries and benefits		
Social functions		
Subscriptions and dues		
Telecommunications and information technology		
Travel		
Other expenses (describe)		

**TOTAL EXPENSES**      ∅      A      3537.10      B

**CAMPAIGN PERIOD EXPENSE LIMIT**      3750 -      C

**ELECTION EXPENSES NOT SUBJECT TO LIMITS**

**ELECTION PERIOD**

**CAMPAIGN PERIOD**

Personal election expenses		
Financial agent services		
Legal and accounting services		
Interest on loans for election expenses		
<b>TOTAL EXPENSES NOT SUBJECT TO LIMITS</b>	∅      D	∅      E



**SHARED ELECTION EXPENSES**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE

Christi Thompson

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OF 1

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	—	2031.75
Candidate's portion of shared election expenses	—	\$ 507.95
Amount paid to supplier(s) (if applicable)	—	2031.75

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 paid to other candidates for your portion.

FULL NAME(S) OF OTHER CANDIDATE(S)	ELECTION PERIOD		CAMPAIGN PERIOD	
	\$ Paid	\$ Received	\$ Paid	\$ Received
Silas white	/		\$ 1015.80	
Stafford Lumley		\$ 507.95		

**OTHER EXPENSES AND TRANSFERS GIVEN**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE

Christi Thompson

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OF

Report all transfers given and expenses that are not election expenses on this form.

DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT
	TOTAL	<input type="text" value="0"/> A

NAME OF CANDIDATE Christi Thompson PAGE 1  
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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))

**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 type="text"/>	x <input type="text"/>	= <input type="text"/>	<input type="checkbox"/>
Number of eligible individuals that purchased tickets	<input 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
<input type="text"/>	<input type="text"/>

**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 type="text"/>	x <input type="text"/>	= <input type="text"/>	<input type="checkbox"/>
Number of eligible individuals that purchased tickets	<input 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
<input type="text"/>	<input type="text"/>

**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.

*No Fundraising Function*

TOTAL COST OF FUNCTION 0

**DISBURSEMENT OF SURPLUS FUNDS**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE Christi Thompson

Balance remaining in campaign account(s) after payment of all expenses 212.90 **A**

Total amount of campaign contributions from candidate 3750-

**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(s). Enter the payment to the candidate below and go to B.

DATE (YYYY/MM/DD)	\$ AMOUNT
<u>2022/10/18</u>	<u>\$ 212.90</u>

**B** If the amount remaining in the campaign account(s) 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(s) 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(s) 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
<u>2022/10/18</u>	<u>Campaign Acct funds transferred to Christi Thompson personal acct.</u>	<u>\$ 212.90</u>

NAME OF CANDIDATE <i>Christi Thompson</i>
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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 NUMBER
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 NUMBER
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)