

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

|                                                                                                                                                                                                                                                                                                                                                                                                                            |                      |                                                                           |                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------|----------------------------------------------|
| GENERAL VOTING DAY (YYYY/MM/DD)<br>2022/10/15                                                                                                                                                                                                                                                                                                                                                                              |                      |                                                                           |                                              |
| CANDIDATE'S FULL NAME<br><b>Mary Theresa Beil</b>                                                                                                                                                                                                                                                                                                                                                                          |                      | BALLOT NAME (IF DIFFERENT)<br><b>Mary Beil</b>                            |                                              |
| CANDIDATE'S MAILING ADDRESS<br><b>465 Pioneer Crescent</b>                                                                                                                                                                                                                                                                                                                                                                 |                      | PHONE NUMBER<br><b>12509274097</b>                                        |                                              |
| CITY/TOWN<br><b>Parksville</b>                                                                                                                                                                                                                                                                                                                                                                                             | PROV.<br><b>B.C.</b> | POSTAL CODE<br><b>V9P1V2</b>                                              | EMAIL (IF AVAILABLE)<br><b>mbeil@shaw.ca</b> |
| JURISDICTION<br><b>Parksville</b>                                                                                                                                                                                                                                                                                                                                                                                          |                      | OFFICE SOUGHT<br><b>Councillor</b>                                        |                                              |
| ELECTION AREA<br><b>Parksville</b>                                                                                                                                                                                                                                                                                                                                                                                         |                      |                                                                           |                                              |
| BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)<br><b>n/a</b>                                                                                                                                                                                                                                                                                                                                                |                      |                                                                           |                                              |
| LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)<br><b>n/a</b>                                                                                                                                                                                                                                                                                                                                                  |                      |                                                                           |                                              |
| <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 NUMBER                                                              |                                              |
| CITY/TOWN                                                                                                                                                                                                                                                                                                                                                                                                                  | PROV.                | POSTAL CODE                                                               | EMAIL (IF AVAILABLE)                         |
| <b>ZERO CAMPAIGN ACTIVITY</b>                                                                                                                                                                                                                                                                                                                                                                                              |                      | <input 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.                                                                                                                                                                                                                                                                 |                      |                                                                           |                                              |
| <ol style="list-style-type: none"> <li>1. No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc.</li> <li>2. No expenses, including signs reused from previous elections, campaign account fees, etc.</li> <li>3. Did not have a campaign account.</li> <li>4. Did not change financial agents during this election.</li> </ol> |                      |                                                                           |                                              |
| <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<br><b>Mary Beil</b>                                                                                                                                                                                                                                                                                                                                                                                 |                      | SIGNATURE OF FINANCIAL AGENT                                              |                                              |
| DATE (YYYY/MM/DD)<br><b>2022/11/20</b>                                                                                                                                                                                                                                                                                                                                                                                     |                      | DATE (YYYY/MM/DD)                                                         |                                              |
| <b>WARNING:</b> 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)

|                                       |
|---------------------------------------|
| NAME OF CANDIDATE<br><b>Mary Beil</b> |
|---------------------------------------|

|                                                                                                   |          |
|---------------------------------------------------------------------------------------------------|----------|
| <b>INCOME</b>                                                                                     |          |
| Value of campaign contributions from all sources (box <b>A</b> , Form 4302)                       | 4,400.00 |
| Amount of all permissible loans received (box <b>B</b> , Form 4304)                               | 0.00     |
| Other income and transfers received (box <b>A</b> , Form 4305)                                    | 0.00     |
| <b>TOTAL INCOME</b> (sum of above boxes)                                                          | 4,400    |
| <br><b>EXPENSES</b>                                                                               |          |
| Election period expenses (box <b>A</b> , Form 4307)                                               | 0.00     |
| Campaign period expenses (box <b>B</b> , Form 4307)                                               | 5,271.13 |
| Election period expenses not subject to limits (box <b>D</b> , Form 4307)                         | 0.00     |
| Campaign period expenses not subject to limits (box <b>E</b> , Form 4307)                         | 0.00     |
| Other expenses and transfers given (box <b>A</b> , Form 4309)                                     | 0.00     |
| Balance remaining in campaign account(s) after payment of all expenses (box <b>A</b> , Form 4311) | 136.87   |
| <b>TOTAL EXPENSES</b> (sum of above boxes)                                                        | 5408.00  |

|                             |                                                      |
|-----------------------------|------------------------------------------------------|
| <b>Campaign Account(s)</b>  |                                                      |
| NAME OF SAVINGS INSTITUTION | <b>Coastal Community Credit Union</b>                |
| ADDRESS                     | <b>140 Alberni Highway, Parksville, B.C. V9P 2G7</b> |
| NAME OF SAVINGS INSTITUTION |                                                      |
| ADDRESS                     |                                                      |

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

NAME OF CANDIDATE  
Mary Beil

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 | \$ | 0.00     |
| Number of anonymous contributors                                 | # | 0 | Anonymous contributions                | \$ | 0.00     |
| Total value of contributions of \$100 or more (box A, Form 4303) |   |   |                                        | \$ |          |
| <b>TOTAL CONTRIBUTIONS</b>                                       |   |   |                                        | \$ | 4,400.00 |

NAME OF CANDIDATE

Mary Beil

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OF 1

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 |                            |                     |                                      |
| Greg Cumiskey            | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/09/09                 | 100.00              | 100.00                               |
| Bonnie Beil              | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/09/10                 | 100.00              | 100.00                               |
| Chris Chilton            | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/09/16                 | 200.00              | 200.00                               |
| Alex Couture-Beil        | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/09/25                 | 500.00              | 500.00                               |
| Mary Beil                | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/09/29                 | 2,500.00            | 2,500.00                             |
| Janice Leclerc           | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/10/03                 | 100.00              | 100.00                               |
| Kathleen Flint           | [REDACTED]                        | [REDACTED] | [REDACTED] | [REDACTED]  | 2022/10/07                 | 900.00              | 900.00                               |
|                          |                                   |            |            |             |                            |                     |                                      |
|                          |                                   |            |            |             |                            |                     |                                      |

**SUBTOTAL OF THIS PAGE**

4,400.00

**TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303**

4,400.00

A

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

NAME OF CANDIDATE

Mary Beil

**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<br>EXPENSES | CAMPAIGN PERIOD<br>EXPENSES |
|------------------------------------------------------------------------------------|-----------------------------|-----------------------------|
| Commercial canvassing in person, by telephone, or over the internet                |                             |                             |
| Newspapers and periodicals                                                         |                             |                             |
| Promotional materials, including newsletters, brochures, buttons and novelty items |                             | 3,192.48                    |
| Radio                                                                              |                             |                             |
| Search engine marketing and optimization                                           |                             |                             |
| Signs                                                                              |                             |                             |
| Value of reused signs                                                              |                             | 1,008.00                    |
| Social media                                                                       |                             |                             |
| Television                                                                         |                             |                             |
| Website displays                                                                   |                             |                             |
| Other expenses (describe)                                                          |                             |                             |
| <b>CAMPAIGN ADMINISTRATION</b>                                                     |                             |                             |
| Accounting services                                                                |                             |                             |
| Bank charges                                                                       |                             | 10.25                       |
| 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                                                                |                             | 1,060.40                    |
| 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)                                                          |                             |                             |
| <b>TOTAL EXPENSES</b>                                                              | 0.00 <b>A</b>               | 5,271.13 <b>B</b>           |
| <b>CAMPAIGN PERIOD EXPENSE LIMIT</b>                                               |                             | 7,490.34 <b>C</b>           |
| <b>ELECTION EXPENSES NOT SUBJECT TO LIMITS</b>                                     | <b>ELECTION PERIOD</b>      | <b>CAMPAIGN PERIOD</b>      |
| Personal election expenses                                                         |                             | 0.00                        |
| Financial agent services                                                           |                             |                             |
| Legal and accounting services                                                      |                             |                             |
| Interest on loans for election expenses                                            |                             |                             |
| <b>TOTAL EXPENSES NOT SUBJECT TO LIMITS</b>                                        | 0.00 <b>D</b>               | 0.00 <b>E</b>               |

|                                |
|--------------------------------|
| NAME OF CANDIDATE<br>Mary Beil |
|--------------------------------|

Balance remaining in campaign account(s) after payment of all expenses 136.87 **A**

Total amount of campaign contributions from candidate 2,500.00

**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<br>(YYYY/MM/DD) | \$ AMOUNT |
|----------------------|-----------|
| 2022/10/31           | 136.87    |

**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<br>(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<br>(YYYY/MM/DD) | DESCRIPTION | \$ AMOUNT |
|----------------------|-------------|-----------|
|                      |             |           |
|                      |             |           |
|                      |             |           |