

#### DISCLOSURE STATEMENT COVER PAGE LOCAL ELECTIONS CANDIDATE

**4300** (22/02)

			Amenament #
			GENERAL VOTING DAY (YYYY/MM/DD) 2022/10/15
CANDIDATE'S FULL NAME		BALLOT NAME (IF DIFFE	RENT)
	1		·
CANDIDATE'S MAILING ADDRESS		PHONE NUMBER	
3182 Yew ST		250 3818	1980
	POSTAL CODE	EMAIL (IF AVAILABLE)	, , , , , , , , , , , , , , , , , , , ,
	1/8x /mg	ware to lat	1000 ON 2000
VICTORIA	00/1/1/	OFFICE SOUGHT	Kinson DShow Ca
JURISDICTION			
ELECTION AREA		mayors	
Victoria			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLIC	CABLE)		
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFER	ENT)	·	
Tick if candidate is their own financial agent	Tick	k if candidate was also	a third party sponsor
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)		EFFECTIVE DATE OF AP	POINTMENT (YYYY/MM/DD)
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NUMBER	
CITY/TOWN PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)	
ZERO CAMPAIGN ACTIVITY	- E 41		
Candidates with zero campaign activity may file this form only. If any forms applicable to the campaign.	of the conditions a	re not met, file other	
			Tick if candidate had
<ol> <li>No income or deposits, including funds from the candidate, co from previous elections, transfers, etc.</li> </ol>	ntributions, donation	ons, gitts, loans, turios	zero campaign activity
2. No expenses, including signs reused from previous elections,	campaign account	t fees, etc.	
<ol> <li>Did not have a campaign account.</li> <li>Did not change financial agents during this election.</li> </ol>			
	1755	river.	
NOTE - ENDORSED CANDIDATES MUST ALSO INCL	UDE A COPY O	OF THEIR CAMPAIG	N FINANCING ARRANGEMENT
DECLARATION:			
I, the undersigned, declare that to the best of my knowledge and bel	ief, this disclosure	statement completely an	d accurately discloses the information
required under the Local Elections Campaign Financing Act.			
SIGNATURE OF CANDIDATE	SIGNATU	RE OF FINANCIAL AGENT	
ym a			
DATE (YYYY/MM/DD)	DATE (YY	YY/MM/DD)	
202211/15			
WARNING: Signing a false declaration is a serious offence and is s	ubject to significan	nt penalties.	

Please submit your report to Elections BC: electoral.finance@elections.bc.ca



### LOCAL ELECTIONS CANDIDATE

**4301** (22/04)

NAME OF CANDIDATE	
INCOME	
Value of campaign contributions from all sources (box A, Form 4302)	34000
Amount of all permissible loans received (box <b>B</b> , Form 4304)	
Other income and transfers received (box A, Form 4305)	
TOTAL INCOME (sum of above boxes)	34000
EXPENSES	
Election period expenses (box <b>A</b> , Form 4307)	114237
Campaign period expenses (box <b>B</b> , Form 4307)	•
Election period expenses not subject to limits (box <b>D</b> , 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)	
TOTAL EXPENSES (sum of above boxes)	114237
Campaign Account(s)	
Comnunity Saunss	
Compunity Savings ADDRESS 103-2750 Quadras T. Victoria B.C. V8746	8
NAME OF SAVINGS INSTITUTION	
ADDRESS	



#### SUMMARY OF CAMPAIGN CONTRIBUTIONS LOCAL ELECTIONS CANDIDATE

ampaign contributions include monetary and include among contributions from the candidate must not include anonymous contributions with contributions with contributions with contributions.	n-kind contril at be reported	I in the same way as contributions from o	ther sources.
Number of contributors who gave less than \$100	# /	Total contributions of less than \$100	\$ 2000
Number of anonymous contributors	#	Anonymous contributions	\$
Total vale	ue of contribu	tions of \$100 or more (box A, Form 4303)	\$
		TOTAL CONTRIBUTIONS	\$ 2000



#### CAMPAIGN CONTRIBUTIONS WITH A TOTAL VALUE OF \$100 OR MORE

**4303** (22/03)

#### LOCAL ELECTIONS CANDIDATE

NAME OF CANDIDATE			-				PAGE
Lyal (Crant ATK.nson  Attach additional forms if necessary.							OF
,,							
FULL NAME OF CONTRIBUTOR	CONTRIBUT	OR'S RESIDENTIAL ADDRESS		T	DATE RECEIVED	CONTRIBUTION	TOTAL OF CONTRIBUTOR'S
	ADDRESS	CITY	PROV.	POSTAL CODE	(YYYY/MM/DD)	AMOONT	CONTRIBUTIONS
Chris main					2022/10/0	3 100	
Tino de Bolla				2	2022/10/	03/00	
Chis Main Tino do Bolla Bruce ATK nson					2022/09/	3 100 03/00 80 12000	
	,						
	I				SUBTOTAL OF THIS PAGE	32002	
				TOTAL CO FROM ALL	NTRIBUTIONS FORM(S) 4303	340 A	



#### PERMISSIBLE LOANS RECEIVED LOCAL ELECTIONS CANDIDATE

(Sum of all boxes A on Form(s) 4304)

4304 (22/02)

NAME OF CANDIDATE  Lyall Grani ATK-n501  OF					
Complete one entry for each permis	sible loan received. Attach additional for te must be disclosed in the same way as	rms if necessary. permissible loans from other sources.			
-OAN					
NAME OF LENDER					
RESIDENTIAL ADDRESS OF LENDER (IF INDIV	/IDUAL)				
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 4	309.				
OAN					
NAME OF LENDER					
RESIDENTIAL ADDRESS OF LENDER (IF INDIV	'IDUAL)				
LOAN DETAILS		\$ ORIGINAL AMOUNT OF LOAN			
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)		A		
	LOAN INTEREST RATE %	PRIME RATE* %	Α		
	LOAN INTEREST RATE %				

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	PAGE		
Report all transfers r	eceived and income that are not campaign contributions or loans on this form.		
DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUNT	
		-	
3.44			
	TOTAL		A



# PROHIBITED CAMPAIGN CONTRIBUTIONS AND LOANS LOCAL ELECTIONS CANDIDATE

**4306** (22/02)

NAME OF CANDIDATE PAGE OF						-
Complete one entry for each prohibited campaign contribution or loan received. Attach additional forms if necessary.						
PROHIBITED CONTRIBUTION						
RECEIVED FROM  INDIVIDUAL ORGANIZATION	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DAT RETUR (YYYY/M	RNED	OR ELE	REMITTED TO ECTIONS BC YY/MM/DD)
ANONYMOUS						
DESCRIPTION OF HOW THE PROHIBITE	D CONTRIBUTION WAS REC	CEIVED				
FULL NAME OF INDIVIDUAL OR ORGANIZ	ZATION					
ADDRESS OF ORGANIZATION, IF APPLIC	CABLE					
PROHIBITED LOAN						
DESCRIPTION OF HOW THE PROHIBITE	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 (YYY	Y/MM/DĐ)	\$ 0	DRIGINAL AMOU	INT OF LOAN	
LOAN INTEREST RATE %		PRIME RA	TE* %			

\*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		
Election Period Expenses - Report the value of all goods and services used Campaign Period Expenses - Report the value of all goods and services used in both periods, report the full amount used in both periods.	ed in the campaign perio	od. campaign signs).
ADVERTISING	ELECTION PERIOD EXPENSES	CAMPAIGN PERIOD EXPENSES
Commercial canvassing in person, by telephone, or over the internet		
Newspapers and periodicals		
Promotional materials, including newsletters, brochures, buttons and novelty items		
Radio		
Search engine marketing and optimization		
Signs		
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		
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	А	В
CAMPAIGN P	PERIOD EXPENSE LIMIT	С
ELECTION EXPENSES NOT SUBJECT TO LIMITS	ELECTION PERIOD	CAMPAIGN PERIOD
,	ELECTION I ERIOD	Orani Alon I Eniob
Personal election expenses		
Financial agent services		
Legal and accounting services		
Interest on loans for election expenses		
TOTAL EXPENSES NOT SUBJECT TO LIMITS	D	E



# SHARED ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE

**4308** (22/02)

NAME OF CANDIDATE				OF
Report the total value of all shared election expenses each unique group of candidates that shared election Attach additional forms if necessary.	s in the applicat n expenses.	ile column for each p	eriod. Use a sepa	arate form for
	ELECTIO	N PERIOD	CAMPAIG	N PERIOD
Total value of shared election expenses				
Candidate's portion of shared election expenses				
Amount paid to supplier(s) (if applicable)				
Note-ensure only your portion of shared election ex	penses is report	ted on Form 4307.		
Provide the full names of other candidates the elective either received from other candidates for their portion	on expenses we	re shared with and th	ne amounts of rei ir portion.	mbursements
	ELECTIO	N PERIOD	CAMPAIG	N PERIOD
FULL NAME(S) OF OTHER CANDIDATE(S)	Amount of re	eimbursement		eimbursement
POLE NAME(O) OF OTHER CARDIDATE(O)	\$ Paid	\$ Received	\$ Paid	\$ Received
		1 1		



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

NAME OF CANDIDATE P						
Report all transfers	given and expenses that are not election expenses on this form.					
DATE (YYYY/MM/DD)	DESCRIPTION	\$ AMOUN	т			
	TOTAL		А			



# FUNDRAISING FUNCTION LOCAL ELECTIONS CANDIDATE

**4310** (22/02)

					PAGE OF
Complete a separate form for each function.					
DATE OF FUNCTION (YYYY/MM/DD) DESCRIPTION OF	FUNDRAISING FUNC	TION	(IF JOINT FUNCTION	N, LIST	OTHER CANDIDATE(S))
A – FUNDRAISING INCOME REPORTED AS	CAMPAIGN CO	TNC	RIBUTIONS		
All income reported as campaign contributions mu				, if a	oplicable, Form 4303.
TICKET SALES (includes function entry fees)	NUMBER OF TICKETS SOLD		CHARGE PER TICKET		TOTAL TICK IF CHARGES CHARGE PER COLLECTED 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	ion or sold at the f	uncti	on for more than t	heir n	narket value) \$ VALUE
B – FUNDRAISING INCOME <u>NOT</u> REPORTE All income <u>not</u> reported as campaign contributions r				NS	
TICKET SALES (includes function entry fees)	NUMBER OF		CHARGE		TOTAL TICK IF CHARGES CHARGE PER
TICKET SALES (includes function entry fees)	TICKETS SOLD		PER TICKET		CHARGES CHARGE PER COLLECTED TICKET VARIES
TICKET SALES (includes function entry fees)  Purchases by eligible individuals of \$50 or less worth of tickets		x		=	CHARGES CHARGE PER
Purchases by eligible individuals	TICKETS SOLD	x	PER TICKET	=	CHARGES CHARGE PER COLLECTED TICKET VARIES
Purchases by eligible individuals of \$50 or less worth of tickets  Number of eligible individuals that purchased tickets  OTHER INCOME NOT REPORTED AS CAMPAIGE	TICKETS SOLD # CONTRIBUTIO	NS	PER TICKET	=	CHARGES CHARGE PER COLLECTED TICKET VARIES
Purchases by eligible individuals of \$50 or less worth of tickets  Number of eligible individuals that purchased tickets  OTHER INCOME NOT REPORTED AS CAMPAIGI (i.e., goods and services sold at the function for their n	TICKETS SOLD # CONTRIBUTIO	NS	PER TICKET	=	CHARGES CHARGE PER TICKET VARIES  \$  V
Purchases by eligible individuals of \$50 or less worth of tickets  Number of eligible individuals that purchased tickets  OTHER INCOME NOT REPORTED AS CAMPAIGE	TICKETS SOLD # CONTRIBUTIO	NS	PER TICKET	=	CHARGES CHARGE PER COLLECTED TICKET VARIES
Purchases by eligible individuals of \$50 or less worth of tickets  Number of eligible individuals that purchased tickets  OTHER INCOME NOT REPORTED AS CAMPAIGI (i.e., goods and services sold at the function for their n	TICKETS SOLD # CONTRIBUTIO	NS	PER TICKET	=	CHARGES CHARGE PER TICKET VARIES  \$  V
Purchases by eligible individuals of \$50 or less worth of tickets  Number of eligible individuals that purchased tickets  OTHER INCOME NOT REPORTED AS CAMPAIGI (i.e., goods and services sold at the function for their n	TICKETS SOLD # CONTRIBUTIO	NS	PER TICKET	=	CHARGES CHARGE PER TICKET VARIES  \$  V
Purchases by eligible individuals of \$50 or less worth of tickets  Number of eligible individuals that purchased tickets  OTHER INCOME NOT REPORTED AS CAMPAIGI (i.e., goods and services sold at the function for their not description	TICKETS SOLD  #  N CONTRIBUTIO  narket value or les  o be included on	NS s)	PER TICKET \$ m 4309.		CHARGES CHARGE PER TICKET VARIES  \$  \$  VALUE



#### DISBURSEMENT OF SURPLUS FUNDS

#### **4311** (22/02)

#### LOCAL ELECTIONS CANDIDATE

NAME	E OF CANDIDATE						
		Balance remaining in campa	aign account(s) after payment of all ex	penses			
	Total amount of campaign contributions from candidate						
Α	if the candidate from the balance	made campaign contributions of more remaining in the campaign account	ney to their own campaign, they can l (s). Enter the payment to the candida	be paid back for those amounts te below and go to B.			
		DATE (YYYY/MM/DD)	\$ AMOUNT				
В	has been paid b	ack (if applicable), the funds must b	<ul> <li>is \$500 or more after payment of a be paid to the jurisdiction where the campaign account(s) is less than \$5</li> </ul>	candidate ran for election. Enter			
		DATE (YYYY/MM/DD)	\$ AMOUNT				
С	candidate has b	emaining in the campaign account(s been paid back (if applicable), the fu below, including a description of how	<ul> <li>is less than \$500 after the paymer inds must be disbursed as directed w the funds were disbursed.</li> </ul>	nt of all expenses, and the by the candidate. Enter this			
()	DATE (YYY/MM/DD)	DE	SCRIPTION	\$ AMOUNT			
		<u> </u>					
			-				



#### FORMER FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE

**4312** (22/02)

NAME OF CANDIDATE				
FORMER FINANCIAL AGENTS				
Enter the information below for any former fir previous elections, or the name of the candid	nancial ag ate if they	ents dur previou	ing this	s election. Do not enter financial agent information from ed as their own financial agent.
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)				
FINANCIAL AGENT'S FULL NAME				
FINANCIAL AGENT'S MAILING ADDRESS	DRESS			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	DDRESS			PHONE NUMBER
CITY/TOWN	PROV.	POSTAL CODE		EMAIL (IF AVAILABLE)