



DISCLOSURE STATEMENT COVER PAGE

LOCAL ELECTIONS CANDIDATE

4300
(22/02)

Amendment # _____

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

CANDIDATE'S FULL NAME: Colleen Danielle Mahoney
BALLOT NAME (IF DIFFERENT): Colleen Mahoney

CANDIDATE'S MAILING ADDRESS: 148 Nicholson St. N.
PHONE NUMBER:

CITY/TOWN: Prince George
PROV.: BC
POSTAL CODE: V2M 3G9
EMAIL (IF AVAILABLE): colleen.d.mahoney@gmail.com

JURISDICTION: City of Prince George
OFFICE SOUGHT: Councillor

ELECTION AREA: City of Prince George

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 Colleen Mahoney	SIGNATURE OF FINANCIAL AGENT Colleen Mahoney
DATE (YYYY/MM/DD) 2022/10/21	DATE (YYYY/MM/DD) 2022/10/21

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

All forms included in this report are available for public inspection.
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** 1-800-661-8683, privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6



CAMPAIGN FINANCING SUMMARY

LOCAL ELECTIONS CANDIDATE

4301
(22/04)

NAME OF CANDIDATE
Colleen Mahoney

INCOME

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

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)

EXPENSES

Election period expenses (box A, Form 4307)

Campaign period expenses (box B, Form 4307)

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)

TOTAL EXPENSES (sum of above boxes)

Campaign Account(s)

NAME OF SAVINGS INSTITUTION

Integris

ADDRESS

1532 6th Ave. Prince George BC V2M 3G9

NAME OF SAVINGS INSTITUTION

ADDRESS

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SUMMARY OF CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE

4302
(22/03)

NAME OF CANDIDATE

Colleen Mahoney

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

Total contributions of less than \$100

\$

Number of anonymous contributors

Anonymous contributions

\$

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

\$ **TOTAL CONTRIBUTIONS**\$ **A**

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

4303
(22/03)

NAME OF CANDIDATE Colleen Mahoney	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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			
SUBTOTAL OF THIS PAGE						0	
TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303							A

This form is available for public inspection.
Addresses will be obscured.
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PERMISSIBLE LOANS RECEIVED

LOCAL ELECTIONS CANDIDATE

4304
(22/02)

NAME OF CANDIDATE Colleen Mahoney	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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)	0.00	B
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RESIDENTIAL ADDRESS:
REQUIRED FOR INDIVIDUAL LENDERS ONLY

***PRIME RATE OF INTEREST:**
REQUIRED FOR LOANS FROM SAVINGS INSTITUTIONS – AVAILABLE ON ELECTIONS BC WEBSITE



PROHIBITED CAMPAIGN CONTRIBUTIONS AND LOANS

LOCAL ELECTIONS CANDIDATE

4306
(22/02)

NAME OF CANDIDATE Colleen Mahoney	PAGE <input style="width: 20px;" type="text"/>
OF <input style="width: 20px;" type="text"/>	

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
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LOAN INTEREST RATE %	PRIME RATE* %
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***PRIME RATE OF INTEREST:**
REQUIRED FOR LOANS FROM SAVINGS INSTITUTIONS – AVAILABLE ON ELECTIONS BC WEBSITE

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SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE

4307
(22/03)

NAME OF CANDIDATE

Colleen Mahoney

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	CAMPAIGN PERIOD EXPENSES
ADVERTISING		
Commercial canvassing in person, by telephone, or over the internet	0	0
Newspapers and periodicals	0	0
Promotional materials, including newsletters, brochures, buttons and novelty items	0	0
Radio	0	0
Search engine marketing and optimization	0	0
Signs	0	0
Value of reused signs	0	0
Social media	0	0
Television	0	0
Website displays	0	0
Other expenses (describe)	0	0
CAMPAIGN ADMINISTRATION		
Accounting services	0	0
Bank charges	0	15.00
Conventions, workshops and meetings	0	0
Donations and gifts	0	0
Fundraising functions	0	0
Furniture and equipment	0	0
Interest expense	0	0
Office rent, utilities, insurance and maintenance	0	0
Office supplies and stationary	0	0
Postage and courier	0	0
Professional services	0	0
Research and data, including election surveys and polls	0	0
Salaries and benefits	0	0
Social functions	0	0
Subscriptions and dues	0	0
Telecommunications and information technology	0	0
Travel	0	0
Other expenses (describe)		
TOTAL EXPENSES	0 A	15.00 B
CAMPAIGN PERIOD EXPENSE LIMIT		C
ELECTION EXPENSES NOT SUBJECT TO LIMITS		
Personal election expenses		
Financial agent services		
Legal and accounting services		
Interest on loans for election expenses		
TOTAL EXPENSES NOT SUBJECT TO LIMITS	0 D	0 E

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SHARED ELECTION EXPENSES LOCAL ELECTIONS CANDIDATE

4308
(22/02)

NAME OF CANDIDATE

Colleen Mahoney

PAGE

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		
Candidate's portion of shared election expenses		
Amount paid to supplier(s) (if applicable)		

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	
	Amount of reimbursement		Amount of reimbursement	
	\$ Paid	\$ Received	\$ Paid	\$ Received



OTHER EXPENSES AND TRANSFERS GIVEN

LOCAL ELECTIONS CANDIDATE

4309
(22/03)

NAME OF CANDIDATE Colleen Mahoney	PAGE <input style="width: 40px;" type="text"/> OF <input style="width: 40px;" type="text"/>
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Report all transfers given and expenses that are not election expenses on this form.

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

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FUNDRAISING FUNCTION LOCAL ELECTIONS CANDIDATE

4310
(22/02)

NAME OF CANDIDATE Colleen Mahoney	PAGE <input style="width: 20px;" type="text"/> OF <input style="width: 20px;" 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"/>	x	<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

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"/>	x	<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

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



DISBURSEMENT OF SURPLUS FUNDS

LOCAL ELECTIONS CANDIDATE

4311
(22/02)

NAME OF CANDIDATE Colleen Mahoney

Balance remaining in campaign account(s) after payment of all expenses 10.00 **A**

Total amount of campaign contributions from candidate 25.00

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 (YYYY/MM/DD)	\$ AMOUNT

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



FORMER FINANCIAL AGENTS LOCAL ELECTIONS CANDIDATE

4312
(22/02)

NAME OF CANDIDATE

Colleen Mathoney

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)