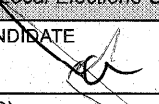


Amendment # \_\_\_\_\_

|  |                    |   |   |
|--|--------------------|---|---|
| GENERAL VOTING DAY (YYYY/MM/DD)<br>2022/10/15  |                    |   |   |
| CANDIDATE'S FULL NAME<br><b>JAMIE GARET ALLEN</b>  |                    | BALLOT NAME (IF DIFFERENT)<br><b>JAMIE ALLEN</b>                          |   |
| CANDIDATE'S MAILING ADDRESS<br><b>1816 TOLIMA COURT</b>  |                    | PHONE NUMBER<br><b>250-318-0041</b>                                       |   |
| CITY/TOWN<br><b>KAMLOOPS</b>   | PROV.<br><b>BC</b> | POSTAL CODE<br><b>V2E0B1</b>  | EMAIL (IF AVAILABLE)<br><b>mjem12@gmail.com</b>                       |
| JURISDICTION<br><b>KAMLOOPS</b>  |                    | OFFICE SOUGHT<br><b>COUNSELLOR</b>  |   |
| ELECTION AREA<br><b>KAMLOOPS</b>   |                    |   |   |
| BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)  |                    |   |   |
| LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)  |                    |   |   |
| <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><br>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.  |                    |   | <input type="checkbox"/> Tick if candidate had zero campaign activity |
| <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><br>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>  |                    | SIGNATURE OF FINANCIAL AGENT  |   |
| DATE (YYYY/MM/DD)<br><b>2023-01-04</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 **JAMIE ALLEN**

**INCOME**

Value of campaign contributions from all sources (box A, Form 4302) **3600<sup>00</sup>**

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) **3600<sup>00</sup>**

**EXPENSES**

Election period expenses (box A, Form 4307)

Campaign period expenses (box B, Form 4307) **2475.89**

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) **2475.89**

**Campaign Account(s)**

NAME OF SAVINGS INSTITUTION

**TD Bank**

ADDRESS

**500 NOTRE DAME DRIVE, KAMLOOPS BC, V2C 6T6**

NAME OF SAVINGS INSTITUTION

ADDRESS

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

NAME OF CANDIDATE

JAMIE ALLEN

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

\$

Number of anonymous contributors

# 0

Anonymous contributions

\$

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

\$ 3600<sup>00</sup>

**TOTAL CONTRIBUTIONS**

\$ 3600<sup>00</sup> A



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

|   |  |
|---|--|
| NAME OF CANDIDATE <span style="font-size: 1.5em; margin-left: 50px;">JAMIE ALLEN</span> | PAGE <input style="width: 30px;" type="text"/><br>OF <input style="width: 30px;" 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 |                            |                     |                                      |
| JAMIE ALLEN                                      |                                   |      |       |             | 2022/08/20                 | \$1250              | \$1250                               |
| SHERE ALLEN                                      |                                   |      |       |             | 2022/08/20                 | \$1250              | \$1250                               |
| CALVIN & ANNE-MARIE ALLEN                        |                                   |      |       |             | 2022/09/09                 | \$1000              | \$1000                               |
| AMBO DHALIWAL                                    |                                   |      |       |             | 2022/09/29                 | \$100               | \$100                                |
|  |                                   |      |       |             |                            |                     |                                      |
|  |                                   |      |       |             |                            |                     |                                      |
|  |                                   |      |       |             |                            |                     |                                      |
|  |                                   |      |       |             |                            |                     |                                      |
|  |                                   |      |       |             |                            |                     |                                      |
|  |                                   |      |       |             |                            |                     |                                      |
| <b>SUBTOTAL OF THIS PAGE</b>                     |                                   |      |       |             |                            | 3600 <sup>00</sup>  |                                      |
| <b>TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303</b> |                                   |      |       |             |                            | 3600 <sup>00</sup>  | A                                    |



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

|                   |  |
|-------------------|--|
| NAME OF CANDIDATE | 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.**

|   |                       |                                     |
|---|-----------------------|-------------------------------------|
| <b>LOAN</b>                                   |                       |                                     |
| NAME OF LENDER                                |                       |                                     |
| RESIDENTIAL ADDRESS OF LENDER (IF INDIVIDUAL) |                       |                                     |
| <b>LOAN DETAILS</b>                           |                       |                                     |
| DATE RECEIVED (YYYY/MM/DD)                    | DATE DUE (YYYY/MM/DD) | \$ ORIGINAL AMOUNT OF LOAN <b>A</b> |
| \$ AMOUNT OF LOAN OUTSTANDING                 | LOAN INTEREST RATE %  | PRIME RATE* %                       |
| <b>Report all loan payments on Form 4309.</b> |                       |                                     |

|   |                       |                                     |
|---|-----------------------|-------------------------------------|
| <b>LOAN</b>                                   |                       |                                     |
| NAME OF LENDER                                |                       |                                     |
| RESIDENTIAL ADDRESS OF LENDER (IF INDIVIDUAL) |                       |                                     |
| <b>LOAN DETAILS</b>                           |                       |                                     |
| DATE RECEIVED (YYYY/MM/DD)                    | DATE DUE (YYYY/MM/DD) | \$ ORIGINAL AMOUNT OF LOAN <b>A</b> |
| \$ AMOUNT OF LOAN OUTSTANDING                 | LOAN INTEREST RATE %  | PRIME RATE* %                       |
| <b>Report all loan payments on Form 4309.</b> |                       |                                     |

|   |          |
|---|----------|
| <b>TOTAL AMOUNT OF ALL LOANS RECEIVED</b><br>(Sum of all boxes A on Form(s) 4304) | <b>B</b> |
|---|----------|

**RESIDENTIAL ADDRESS:**  
REQUIRED FOR INDIVIDUAL LENDERS ONLY

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



|                   |  |
|-------------------|--|
| NAME OF CANDIDATE | 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<br>(YYYY/MM/DD) | \$ VALUE | DATE RETURNED<br>(YYYY/MM/DD) | OR<br>DATE REMITTED TO<br>ELECTIONS BC<br>(YYYY/MM/DD) |
| <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION<br><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<br>RETURNED TO LENDER<br>(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

JAMIE ALLEN

**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   |                          |                          |
| Promotional materials, including newsletters, brochures, buttons and novelty items |                          | 310.98                   |
| Radio  |                          |                          |
| Search engine marketing and optimization   |                          |                          |
| Signs  |                          | 1842.59                  |
| Value of reused signs  |                          |                          |
| Social media   |                          | 151.70                   |
| Television   |                          |                          |
| Website displays   |                          | 157.50                   |
| Other expenses (describe)  |                          |                          |

**CAMPAIGN ADMINISTRATION**

|   |  |       |
|---|--|-------|
| Accounting services                                     |  |       |
| Bank charges  |  | 13.12 |
| 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**

|  |          |
|--|----------|
|  | <b>A</b> |
|--|----------|

|         |          |
|---------|----------|
| 2475.89 | <b>B</b> |
|---------|----------|

**CAMPAIGN PERIOD EXPENSE LIMIT**

|          |          |
|----------|----------|
| 34080.90 | <b>C</b> |
|----------|----------|

**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> | <b>D</b>        | <b>E</b>        |







NAME OF CANDIDATE

PAGE

OF

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

x

=



Number of eligible individuals that purchased tickets

**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

#

\$

\$

✓

Purchases by eligible individuals  
of \$50 or less worth of tickets

x

=



Number of eligible individuals that purchased tickets

**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

NAME OF CANDIDATE

JAMIE ALLEN

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

1124<sup>00</sup>

A

Total amount of campaign contributions from candidate

1250<sup>00</sup>

**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             |
|----------------------|-----------------------|
| 2022/12/06           | \$ 1124 <sup>00</sup> |

**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 |
|----------------------|-------------|-----------|
|                      |             |           |
|                      |             |           |
|                      |             |           |

|                   |
|-------------------|
| 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                |       |             |                      |
| 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) |