

For Period

2024-01-01

YYYY / MM / DD

to

2024-12-31

YYYY / MM / DD

Amendment #

FULL NAME OF ELECTOR ORGANIZATION

Partners in Education Abbotsford

LEGAL NAME OF ELECTOR ORGANIZATION (IF DIFFERENT)

JURISDICTION(S)

School District 34, Abbotsford

FINANCIAL AGENT'S FULL NAME

Shannon White

FINANCIAL AGENT'S MAILING ADDRESS

32958 Banff Place

PHONE NUMBER

604 832 6311

CITY / TOWN

Abbotsford

PROV.

BC

POSTAL CODE

V2S 7B1

EMAIL (OPTIONAL)

This financial report includes the following forms:

FORMS CHECKLIST ☒

These forms must be
included in all reports.

Statement of Assets and Liabilities

Form 4446



Statement of Income and Expenses

Form 4447



These forms only need to be filed
if there is information to report.

Summary of Campaign Contributions

Form 4448



Campaign Contributions with a Total Value of \$100 or More

Form 4449



Permissible Loans

Form 4450



Prohibited Campaign Contributions and Loans

Form 4451



Summary of Advertising Expenses by Class

Form 4452



Summary of Fundraising Functions

Form 4453



Fundraising Function

Form 4454



Transfers Received From or Given to Candidates

Form 4455



DECLARATION:

I, the undersigned, declare that to the best of my knowledge and belief, this financial report completely and accurately discloses the information required under the *Local Elections Campaign Financing Act*.

SIGNATURE OF FINANCIAL AGENT

Shannon White

DATE (YYYY / MM / DD)

SIGNATURE OF AUTHORIZED PRINCIPAL OFFICIAL

[Signature]

DATE (YYYY / MM / DD)

2025-03-28

WARNING: Signing a false statement 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

STATEMENT OF ASSETS AND LIABILITIES

4446
 (22/01)

 AS OF DATE (YYYY / MM / DD)
 2024/12/31

 NAME OF ELECTOR ORGANIZATION
 Partners in Education Abbotsford

Current Assets

Balance in campaign accounts

Balance in other accounts

Accounts receivable

Inventory

Investments

Prepaid expenses

Other (describe)

Total Current Assets \$ 0.00

Fixed Assets

Furniture and fixtures

(less accumulated amortization)

() \$ 0.00

Office equipment

(less accumulated amortization)

() \$ 0.00

Land and buildings

(less accumulated amortization)

() \$ 0.00

Other (describe)

(less accumulated amortization)

() \$ 0.00

Total Fixed Assets \$ 0.00

Total Assets \$ 0.00 **A**
Liabilities

Accounts payable

Wages, salaries payable

Loans payable

Other (describe)

Total Liabilities \$ 0.00 **B**
Accumulated Surplus (Deficit) (A – B) \$ 0.00 **C**

STATEMENT OF INCOME AND EXPENSES

4447
(22/01)

NAME OF ELECTOR ORGANIZATION

Partners in Education Abbotsford

Income

Total value of campaign contributions (box E, Form 4448)

Total fundraising income not reported as campaign contributions (box E, Form 4453)

Total transfers received from candidate(s) (box A, Form 4455)

Advertising income

Interest and investment income

Product sales

Rental income

Other income (describe)

Total Income

\$ 0.00

A
Expenses

Accounting services

Advertising (box A, Form 4452)

Amortization expense

Bad debt expense

Bank charges

Conventions, workshops and meetings

Donations and gifts

Furniture and equipment

Interest expense

Office rent, utilities, insurance and maintenance

Office supplies and stationery

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

Total cost of fundraising functions (box B, Form 4453)

Total transfers given to candidate(s) (box B, Form 4455)

Other expenses (describe)

Total Expenses

\$ 0.00

B
Period Surplus (Deficit) (A – B)

\$ 0.00

C