

DISCLOSURE STATEMENT COVER PAGE
LOCAL ELECTIONS CANDIDATE

4300
(22/02)

Amendment # _____

GENERAL VOTING DAY (YYYY/MM/DD)
2025/09/27

CANDIDATE'S FULL NAME Christine Lee Makasoff			BALLOT NAME (IF DIFFERENT) Christine Makasoff		
CANDIDATE'S MAILING ADDRESS 15908 Prospect Crescent			PHONE NUMBER 6049706823		
CITY/TOWN WHITE ROCK	PROV. 	POSTAL CODE V4B 2C5	EMAIL (IF AVAILABLE) cmakasoff@gmail.com		
JURISDICTION White Rock			OFFICE SOUGHT City Councillor		
ELECTION AREA					

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.

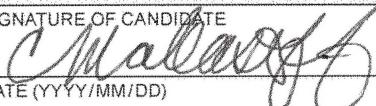
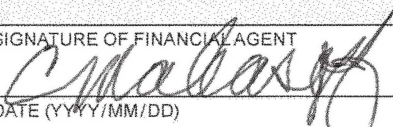
1. No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc.
2. No expenses, including signs reused from previous elections, campaign account fees, etc.
3. Did not have a campaign account.
4. Did not change financial 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 	SIGNATURE OF FINANCIAL AGENT 
DATE (YYYY/MM/DD) 2025/12/23	DATE (YYYY/MM/DD)

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

CAMPAIGN FINANCING SUMMARY
LOCAL ELECTIONS CANDIDATE

4301
(22/04)

NAME OF CANDIDATE
Christine Makasoff

INCOME

Value of campaign contributions from all sources (box **A**, Form 4302) 1,600.00

Amount of all permissible loans received (box **B**, Form 4304) 0.00

Other income and transfers received (box **A**, Form 4305) 0.00

TOTAL INCOME (sum of above boxes) 1,600.00

EXPENSES

Election period expenses (box **A**, Form 4307) 1,974.47

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) 1,974.47

Campaign Account(s)

NAME OF SAVINGS INSTITUTION
Royal Bank of Canada

ADDRESS
1586 Johnston Road, White Rock, BC

NAME OF SAVINGS INSTITUTION

ADDRESS

SUMMARY OF CAMPAIGN CONTRIBUTIONS

LOCAL ELECTIONS CANDIDATE

4302
(22/03)

NAME OF CANDIDATE

Christine Makasoff

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)

\$

1,600.00

TOTAL CONTRIBUTIONS

\$

1,600.00

A

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

LOCAL ELECTIONS CANDIDATE

4303
(22/03)

NAME OF CANDIDATE
Christine Makasoff

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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			
Elna Maria Makasoff					2025/08/21	500.00	1,000.00
Leslie Abe					2025/08/24	500.00	500.00
Elna Maria Makasoff					2025/09/24	500.00	1,000.00
Mark Thorvaldson					2025/09/29	100.00	100.00

**SUBTOTAL OF
THIS PAGE** 1,600.00

**TOTAL CONTRIBUTIONS
FROM ALL FORM(S) 4303** 1,600.00 A

SUMMARY OF ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE

4307
(22/03)

NAME OF CANDIDATE

Christine Makasoff

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

Radio

Search engine marketing and optimization

Signs

Value of reused signs

Social media

Television

Website displays

851.20

596.38

486.89

40.00

Other expenses (describe)

Candidate portion of hall rental for debate

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

1,974.47

A
B
CAMPAIGN PERIOD EXPENSE LIMIT
C
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

TOTAL EXPENSES NOT SUBJECT TO LIMITS
D
E

SHARED ELECTION EXPENSES

LOCAL ELECTIONS CANDIDATE

4308
(22/02)

NAME OF CANDIDATE

Christine Makasoff

PAGE 1

OF 1

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

40.00

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.

ELECTION PERIOD

CAMPAIGN PERIOD

FULL NAME(S) OF OTHER CANDIDATE(S)

Amount of reimbursement

\$ Paid

\$ Received

Amount of reimbursement

\$ Paid

\$ Received