



# ELECTION FINANCING REPORT CANDIDATE

F-C (08/09)

**ELECTIONS BC**  
A non-partisan Office of the Legislature

PLEASE PRINT IN BLOCK LETTERS

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

CANDIDATE'S LAST NAME <b>GRIEVE</b>		FIRST NAME <b>Bob</b>	MIDDLE NAME(S) <b>MICHEL</b>
ELECTORAL DISTRICT <b>BOUNDARY/SIMILKAMEEN</b>		REGISTERED POLITICAL PARTY <b>GREEN PARTY</b>	GENERAL VOTING DAY (YYYY / MM / DD) <b>2009 / 05 / 12</b>
FINANCIAL AGENT'S LAST NAME <b>MCGREGOR</b>		FIRST NAME <b>Leanne</b>	MIDDLE NAME(S)
FINANCIAL AGENT'S MAILING ADDRESS <b>Box 1542 GRAND FORKS B.C.</b>			
POSTAL CODE <b>V0H 1H0</b>	PHONE NUMBER <b>250 442 8462</b>	FAX NUMBER	EMAIL ADDRESS <b>kinglear@tdws.net</b>

This financing report includes the following forms:

All Candidates:

	FORMS CHECKLIST
Statement of Election Income and Expenses -	Form SI-I&E-E <input type="checkbox"/>
Summary of Expenses -	Form Sm-E <input checked="" type="checkbox"/>
Summary of Political Contributions by Class -	Form Sm-C <input type="checkbox"/>
Political Contributions of Money / Property / Services over \$250 -	Form S-A1 <input checked="" type="checkbox"/>
Permitted Anonymous Contributions Accepted at Functions -	Form S-A2 <input type="checkbox"/>
Prohibited Contributions -	Form S-Ax <input type="checkbox"/>
Personal Expenses Paid by Financial Agent -	Form Sm-PE1 <input type="checkbox"/>
Personal Expenses Paid by Candidate -	Form Sm-PE2 <input checked="" type="checkbox"/>
Summary of Fundraising Functions -	Form Sm-F <input type="checkbox"/>
Fundraising Function -	Form S-F <input type="checkbox"/>
Loans and Guarantees -	Form S-L1 <input type="checkbox"/>
Loans / Debts Forgiven / Written Off -	Form S-L2 <input type="checkbox"/>
Transfers Received -	Form S-T-Rcv <input type="checkbox"/>
Transfers Given -	Form S-T-Giv <input type="checkbox"/>

Candidates Who Were Nomination Contestants:

Summary of Contestant Expenses -	Form Sm-E-NC <input type="checkbox"/>
Summary of Political Contributions by Class -	Form Sm-C <input checked="" type="checkbox"/>
Political Contributions of Money / Property / Services over \$250 -	Form S-A1 <input type="checkbox"/>
Permitted Anonymous Contributions Accepted at Functions -	Form S-A2 <input type="checkbox"/>
Personal Expenses Paid by Financial Agent -	Form Sm-PE1 <input type="checkbox"/>
Personal Expenses Paid by Contestant -	Form Sm-PE2 <input type="checkbox"/>
Summary of Fundraising Functions -	Form Sm-F <input type="checkbox"/>
Fundraising Function -	Form S-F <input type="checkbox"/>

I, the Financial Agent, declare that:

- (a) I am authorized to act on behalf of the above-named candidate;  
 (b) this report and appropriate forms have been prepared in accordance with the Election Act; and  
 (c) to the best of my knowledge, information and belief, all the information contained in this statement is complete and accurate.

SIGNATURE OF FINANCIAL AGENT

*Leanne Mc Gregor*

DATE (YYYY / MM / DD)

2009/06/25

**WARNING: Signing a false statement is a serious offence and is subject to significant penalties.**ORIGINAL — CHIEF ELECTORAL OFFICE  
PLEASE KEEP A COPY FOR YOUR RECORDSAll forms included in this report are available for public inspection  
at the Chief Electoral Office during regular office hours.



# STATEMENT OF ELECTION INCOME AND EXPENSES

S6-13E-E (08/09)

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GENERAL VOTING DAY (YYYY / MM / DD)  
**2009-05-12**

NAME OF FILING ENTITY

**2013 GRIEVE - GREEN PARTY - BOUNDARY/SIMILKA MEEN**

Total value of political contributions from all sources (from box E on form Sm-C)

**1533**

Total transfers received (from box A on form S-T-Rcv)

**0**

Interest income

**0**

Total gross fundraising function income not reported as political contributions  
(from box E on form Sm-F)

**0**

Other Income (describe)

**0**

Total Income (sum of above boxes)

**1533**

**A**

Total value of election expenses subject to limits during 60-day pre-campaign period  
(from box A on form Sm-E)

**1528**

Total value of election expenses subject to limits during campaign period  
(from box B on form Sm-E)

**0**

Total value of election expenses not subject to limits (from box C on form Sm-E)

**0**

Total other expenses (from box D on form Sm-E)

**0**

Total transfers given (from box A on form S-T-Giv)

**0**

Total Expenditures (sum of above boxes)

**1528**

**B**

Surplus (Deficit) (box A - box B)

**5.00**

**C**

**For Candidates Only**

Balance in campaign account as of date of report

**5.00**

**D**



# SUMMARY OF EXPENSES

Sm-E (08/09)

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NAME OF FILING ENTITY

*BOB GRIENG - GREEN PARTY - JOONDARY/SIMILKAMEE IV*

Election Expenses	80-day Pre-campaign Period Election Expenses Subject to Limits	Campaign Period Election Expenses Subject to Limits	Election Expenses Not Subject to Limits	Non-election Expenses Used Outside 80-day Pre-campaign and Campaign Periods
Accounting and audit services				
Bank charges		10		
Candidate's nomination deposit		250		
Donations and gifts		1533		
Convention, workshop and meeting fees and rentals				
Data processing / information technology				
Excess nomination expenses (from box F, form Sm-BNC)				
Furniture and equipment				
Insurance				
Interest expense				
Media advertising				
Newspapers and promotional material (signs, brochures, etc.)		964		
Office rent, utilities and maintenance				
Office supplies, stationery				
Personal expenses of candidate (from box G, form Sm-PEE)				
Postage and courier		68		
Professional services				
Research and polling				
Salaries and benefits				
Social functions / thank-you parties				
Telecommunications				
Travel		223		
Total cost of fundraising functions held during the 80-day pre-campaign period and the campaign period which did not incur net losses (from box H, form Sm-F)				
Total cost of fundraising functions held outside the 80-day pre-campaign period and the campaign period (from box I, form Sm-F)				
Total net losses of fundraising functions which incurred net losses during the campaign period (from box J, form Sm-F)				
Other expenses (describe)				
<b>Total Expenses</b>				
	A	B	C	D

*As per attached*



# SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (08/11)

If form is for Nomination Contestant, please tick

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NAME OF FILING ENTITY

DOB GRIEVE - GREEN PARTY - BOUNDARY / SIMILKAMEEN

Total value of contributions from each of the following classes of contributor:

	Contributions greater than \$250		Contributions of \$250 or less	
Individuals	550	1a	725	1b
Corporations		2a		2b
Unincorporated Business / Commercial Organizations		3a		3b
Trade Unions		4a		4b
Non-profit Organizations		5a		5b
Other Identifiable Contributions	258	6a		6b
<b>Classified subtotals (1a to 6a &amp; 1b to 6b) (box A = box A, S-A1)</b>	<b>808</b>	<b>A</b>	<b>725</b>	<b>B</b>
<b>Classified totals (A + B)</b>			<b>1533</b>	<b>C</b>
<b>Total anonymous contributions (from box A, S-A2)</b>			<b>0</b>	<b>D</b>
<b>Total value of all political contributions from all sources (C + D)</b>			<b>1533</b>	<b>E</b>

Total contributions of money **1533** **F**

Total contributions of goods, services and discounts (includes contributions through loans and debts) **0** **G**  
(boxes F + G must equal box E)

Number of contributors who made contributions of \$250 or less in total value **8** **H**

Total dollar amount of all income tax receipts issued for political contributions received (Leadership Contestants cannot issue tax receipts) **\$ 1533** **I**



# POLITICAL CONTRIBUTIONS OF MONEY, PROPERTY OR SERVICES WITH A VALUE GREATER THAN \$250

S-A1 (08/01)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY  
**DOB GRIEVE - GREEN PARTY - BOUNDARY / SIMILKAMEEN**

PAGE   
OF

FULL NAME OF CONTRIBUTOR (If a membered corporation or an unincorporated organization, include full names of two directors)	CLASS OF CONTRIBUTOR (X APPROPRIATE CLASS)						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION (YYYY/MM/DD)	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			
Allison Hutton	X						300	2009/04/25	300
GREEN PARTY of B.C.						X	258	2009/04/29	558

\* CLASS OF CONTRIBUTOR:  
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

TOTAL OF INDIVIDUAL CONTRIBUTIONS **A 558**

ORIGINAL — CHIEF ELECTORAL OFFICE  
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# PERSONAL EXPENSES PAID BY CANDIDATE / CONTESTANT

Sm-PE2 (99/05)

(This form must be completed by the candidate or contestant  
and submitted to the financial agent within 60 days)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

### Paid by the Candidate or Contestant

#### A. Transportation to, from or within electoral district

Air travel

Bus, taxi

Rental vehicle

Private vehicle

Other (describe)

*Fuel*

*138*

Total

*138*

A

#### B. Cost of lodging, meals & incidental expenses while travelling

Hotel, motel

Meals

*85*

Incidental expenses (describe)

Total

*85*

B

#### C. Cost of renting a necessary temporary residence

Rent

C

#### D. All other necessary personal expenses related to campaign or contest

Family care

Disability expenses

Total

D

#### E. Total personal expenses paid by candidate or contestant

Total of items A to D

*223*

E