



ELECTION FINANCING REPORT

CANDIDATE

F-C
(15/09)

ELECTIONS BC
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Amendment # _____

CANDIDATE'S LAST NAME Clarke		FIRST NAME Robert		MIDDLE NAME(S) Alexander
ELECTORAL DISTRICT Mid Island-Pacific Rim		POLITICAL PARTY/AFFILIATION Libertarian Party		GENERAL VOTING DAY (YYYY / MM / DD) 2017 / 05 / 09
FINANCIAL AGENT'S LAST NAME Clarke		FIRST NAME Robert		MIDDLE NAME(S) Alexander
FINANCIAL AGENT'S MAILING ADDRESS 2828 Anderson Ave			CITY / TOWN Port Alberni	
POSTAL CODE V9Y 1V6	PHONE NUMBER 250-720-4922	FAX NUMBER —	EMAIL ADDRESS bobthebeancounter@hotmail.com	

This financing report includes the following forms:

All Candidates:

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

Candidates Who Were Nomination Contestants:

Nomination Contestant Expenses – Form Sm-E-NC	<input type="checkbox"/>	<input type="checkbox"/>
Summary of Political Contributions by Class – Form Sm-C	<input type="checkbox"/>	<input type="checkbox"/>
Political Contributions of Money / Property / Services over \$250 – Form S-A1	<input type="checkbox"/>	<input type="checkbox"/>
Permitted Anonymous Contributions Accepted at Functions – Form S-A2	<input type="checkbox"/>	<input type="checkbox"/>
Personal Expenses Paid by Financial Agent – Form Sm-PE1	<input type="checkbox"/>	<input type="checkbox"/>
Personal Expenses Paid by Contestant – Form Sm-PE2	<input type="checkbox"/>	<input type="checkbox"/>
Summary of Fundraising Functions – Form Sm-F	<input type="checkbox"/>	<input type="checkbox"/>
Fundraising Function – Form S-F	<input type="checkbox"/>	<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 	DATE (YYYY / MM / DD) 2017/07/18
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties.



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STATEMENT OF ELECTION INCOME AND EXPENSES

St-I&E-E
(15/07)

GENERAL VOTING DAY (YYYY / MM / DD)
2017/05/09

NAME OF FILING ENTITY Rob Clarke - BC Libertarian Party - Mid Island-Pacific Rm		
Total value of political contributions from all sources (from box E on form Sm-C)	900	
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	
Candidate's nomination deposit refund	0	
Other income (describe)	0	
Total Income (sum of above boxes)	900	A
Total value of election expenses subject to limits (from box A on form Sm-E)	650	
Total value of election expenses not subject to limits (from box B on form Sm-E)	250	
Total value of other expenses (from box C on form Sm-E)	0	
Total transfers given (from box A on form S-T-Giv)	0	
Total Expenditures (sum of above boxes)	900	B
For Candidates Only		
Balance in campaign account as of date of report	0	C

This form is available for public inspection.

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PLEASE KEEP A COPY FOR YOUR RECORDS



SUMMARY OF EXPENSES

Sm-E
(15/08)

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NAME OF FILING ENTITY
Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rim

Election Expenses	Election Expenses Subject to Limits	Election Expenses Not Subject to Limits	Other Expenses
Accounting and audit services			
Bank charges	2		
Candidate's nomination deposit	250	250	
Convention, workshop and meeting fees and rentals			
Data processing / information technology			
Donations and gifts			
Excess nomination expenses (from box D, form Sm-E-NC)			
Furniture and equipment			
Insurance			
Interest expense			
Media advertising	302		
Newsletters and promotional material (signs, brochures, etc.)	246		
Office rent, utilities and maintenance			
Office supplies, stationery	100		
Personal expenses of candidate (from box G, form Sm-PE1)	100		
Postage and courier			
Professional services			
Research and polling			
Salaries and benefits			
Social functions / thank-you parties			
Telecommunications			
Travel	100		
Total cost of fundraising functions held during the campaign period (from box F, form Sm-F)			
Total cost of fundraising functions held outside the campaign period (from box G, form Sm-F)			
Total net losses of fundraising functions which incurred net losses during the campaign period (from box H, form Sm-F)			
Other expenses (describe)			

Total Expenses	650	A	250	B	0	C
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SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C
(15/07)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY: Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rim

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

	Contributions greater than \$250		Contributions of \$250 or less	
Individuals	400	1a	500 500	1b
Corporations		2a		2b
Unincorporated Business / Commercial Organizations		3a		3b
Trade Unions		4a		4b
Non-profit Organizations		5a		5b
Other Identifiable Contributions		6a		6b

Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1) 400 A 450 B

Classified totals (A + B) 900 C 900

Total anonymous contributions (from box A, S-A2) 0 D

Total value of all political contributions from all sources (C + D) 900 E 900

Total contributions of money 900 F 900

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 3 H

Total dollar amount of all income tax receipts issued (Leadership Contestants cannot issue tax receipts) \$ 0 I



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

S-A1
(15/06)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
Rob Clarke BC Libertarian Party - Mid Island - Pacific Rim

PAGE 1
OF 1

FULL NAME OF CONTRIBUTOR <small>(If a numbered corporation or an unincorporated organization, include full names of two directors)</small>	CLASS OF CONTRIBUTOR* <small>(X APPROPRIATE CLASS)</small>						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION <small>(YYYY/MM/DD)</small>	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			
<i>Ed Clarke</i>	<input checked="" type="checkbox"/>						<i>400</i>		<i>400</i>
XXXXXXXXXXXX	XXXX						XXXX		XXXX

* 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** *400*

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PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2
(15/06)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
Rob Clarke^{BC}-Libertarian Party-Mid Island-Pacific Rim

PAGE **1**
OF **1**

DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
TOTAL			A 0

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PROHIBITED CONTRIBUTIONS

S-Ax
(15/09)

NAME OF FILING ENTITY
Rob Clarke^{BC} - Libertarian Party - Mid Island - Pacific Rim

PAGE
OF

DATE RECEIVED (YYYY/MM/DD)	CIRCUMSTANCES	AMOUNT	DATE RETURNED (YYYY/MM/DD)	OR DATE REMITTED TO CHIEF ELECTORAL OFFICE (YYYY/MM/DD)
TOTAL			A	0

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PERSONAL EXPENSES PAID BY FINANCIAL AGENT

Sm-PE1
(15/06)

(Personal expenses of candidate or contestant
which were paid by the financial agent)

If form is for Nomination Contest, please tick

<small>NAME OF FILING ENTITY</small> Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rim													
Paid by the Financial Agent													
A. Transportation to, from or within electoral district	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Air travel</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">Bus, taxi</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">Rental vehicle</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">Private vehicle</td> <td style="border: 1px solid black; height: 20px; text-align: center;">XXXXXXXXXX</td> </tr> <tr> <td style="padding: 2px;">Other (describe)</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">A</td> </tr> </table>	Air travel		Bus, taxi		Rental vehicle		Private vehicle	XXXXXXXXXX	Other (describe)		Total	A
Air travel													
Bus, taxi													
Rental vehicle													
Private vehicle	XXXXXXXXXX												
Other (describe)													
Total	A												
B. Cost of lodging, meals and incidental expenses while travelling	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Hotel, motel</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">Meals</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">Incidental expenses (describe)</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">B</td> </tr> </table>	Hotel, motel		Meals		Incidental expenses (describe)		Total	B				
Hotel, motel													
Meals													
Incidental expenses (describe)													
Total	B												
C. Cost of renting a necessary temporary residence	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Rent</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">C</td> </tr> </table>	Rent		Total	C								
Rent													
Total	C												
D. All other necessary personal expenses related to campaign or contest	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Family care</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">Disability expenses</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">D</td> </tr> </table>	Family care		Disability expenses		Total	D						
Family care													
Disability expenses													
Total	D												
E. Total personal expenses paid by the financial agent	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Total of items A to D</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">E</td> </tr> </table>	Total of items A to D		Total	E								
Total of items A to D													
Total	E												
F. Total personal expenses paid out of pocket by candidate or contestant	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">From Sm-PE2, box E</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">F</td> </tr> </table>	From Sm-PE2, box E		Total	F								
From Sm-PE2, box E													
Total	F												
G. Total personal expenses from Sm-PE1 and Sm-PE2	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Total of items E + F</td> <td style="width: 40%; border: 1px solid black; text-align: center; padding: 2px;">100</td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="border: 1px solid black; text-align: center;">G</td> </tr> </table>	Total of items E + F	100	Total	G								
Total of items E + F	100												
Total	G												



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PERSONAL EXPENSES PAID BY CANDIDATE / CONTESTANT

Sm-PE2
(15/06)

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

If form is for Nomination Contest, please tick

NAME OF FILING ENTITY													
Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rim													
Paid by the Candidate or Contestant													
A. Transportation to, from or within electoral district	<table border="1"> <tr><td>Air travel</td><td></td></tr> <tr><td>Bus, taxi</td><td></td></tr> <tr><td>Rental vehicle</td><td></td></tr> <tr><td>Private vehicle</td><td>100</td></tr> <tr><td>Other (describe)</td><td></td></tr> <tr><td>Total</td><td>A</td></tr> </table>	Air travel		Bus, taxi		Rental vehicle		Private vehicle	100	Other (describe)		Total	A
Air travel													
Bus, taxi													
Rental vehicle													
Private vehicle	100												
Other (describe)													
Total	A												
B. Cost of lodging, meals and incidental expenses while travelling	<table border="1"> <tr><td>Hotel, motel</td><td></td></tr> <tr><td>Meals</td><td></td></tr> <tr><td>Incidental expenses (describe)</td><td></td></tr> <tr><td>Total</td><td>B</td></tr> </table>	Hotel, motel		Meals		Incidental expenses (describe)		Total	B				
Hotel, motel													
Meals													
Incidental expenses (describe)													
Total	B												
C. Cost of renting a necessary temporary residence	<table border="1"> <tr><td>Rent</td><td>C</td></tr> </table>	Rent	C										
Rent	C												
D. All other necessary personal expenses related to campaign or contest	<table border="1"> <tr><td>Family care</td><td></td></tr> <tr><td>Disability expenses</td><td></td></tr> <tr><td>Total</td><td>D</td></tr> </table>	Family care		Disability expenses		Total	D						
Family care													
Disability expenses													
Total	D												
E. Total personal expenses paid by candidate or contestant	<table border="1"> <tr><td>Total of items A to D</td><td>100</td><td>E</td></tr> </table>	Total of items A to D	100	E									
Total of items A to D	100	E											

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SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Sm-F
(15/07)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rim	
Number of fundraising functions held	<input style="width: 100px; height: 30px;" type="text" value="0"/>
Total gross fundraising function income (sum of boxes M on all S-F forms)	<input style="width: 100px; height: 30px;" type="text" value="0"/> A
Total cost of fundraising functions (sum of boxes N on all S-F forms)	<input style="width: 100px; height: 30px;" type="text" value="0"/> B
Total net income (or loss) from fundraising functions (A - B)	<input style="width: 100px; height: 30px;" type="text" value="0"/> C
Total amount of gross income reported as political contributions (sum of boxes G on all S-F forms)	<input style="width: 100px; height: 30px;" type="text" value="0"/> D
Total amount of gross income NOT reported as political contributions (sum of boxes L on all S-F forms)	<input style="width: 100px; height: 30px;" type="text" value="0"/> E
<small>(boxes D + E must equal box A)</small>	
For election financing reports only (see instructions in the Election Financing Report Completion Guide before completing this section)	
Total cost of fundraising functions held during the campaign period	<input style="width: 100px; height: 30px;" type="text" value="0"/> F
Total cost of fundraising functions held outside the campaign period	<input style="width: 100px; height: 30px;" type="text" value="0"/> G
Total net losses of fundraising functions which incurred net losses during the campaign period	<input style="width: 100px; height: 30px;" type="text" value="0"/> H

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FUNDRAISING FUNCTION

(Submit a separate form for each function held)

S-F
(15/07)

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If form is for Nomination Contestant, please tick

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NAME OF FILING ENTITY Rob Clarke-BC Libertarian Party-Mid Island-Pacific Rim	
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY)

Gross income reported as political contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected		Tick if Charge per Ticket Varies
Purchases by organizations	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	A	<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	B	<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	C	<input type="checkbox"/>

Other gross income reported as contributions, including anonymous contributions (provide full details)

			D
			E
			F

Total gross income reported as political contributions (A + B + C + D + E + F) G

Gross income not reported as political contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected		Tick if Charge per Ticket Varies
Purchases by individuals of tickets of \$50 or less	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	H	<input type="checkbox"/>

Other gross income not reported as contributions (provide full details)

			I
			J
			K

Total gross income not reported as political contributions (H + I + J + K) L

Total gross income (G + L) M

Total cost of function N

Net income (loss) (box M - N) O



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LOANS AND GUARANTEES

S-L1
(15/06)

NAME OF FILING ENTITY
Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rm

PAGE 1
OF 1

DATE RECEIVED (YYYY/MM/DD)	FULL NAMES OF LENDER AND/OR GUARANTOR	CLASS* (X)						CONDITIONS (if applicable)	DUE DATE (YYYY/MM/DD)	ORIGINAL AMOUNT OF LOAN/GUARANTEE \$	AMOUNT OF LOAN OUTSTANDING \$	INT. RATE %	PRIME RATE %	A	B	C	
		1	2	3	4	5	6							AMOUNT OF INTEREST PAYABLE AT PRIME RATE \$	AMOUNT OF INTEREST BEING CHARGED \$	BENEFIT/ CONTRIBUTION (A - B) \$	
* CLASS OF CONTRIBUTOR: 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION, 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER										TOTAL	D	0	E	0	TOTAL	F	0

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LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2
(15/09)

NAME OF FILING ENTITY
Rob Clarke - BC Libertarian Party - Mid Island - Pacific Rim

PAGE **1**
OF **1**

DATE FORGIVEN/ WRITTEN OFF (YYYY/MM/DD)	FULL NAME OF LENDER / CREDITOR	CLASS OF CONTRIBUTOR* (X APPROPRIATE CLASS)						CONDITIONS (if applicable)	ORIGINAL AMOUNT OF LOAN/DEBT \$	AMOUNT OF LOAN/DEBT FORGIVEN/WRITTEN OFF \$	
		1	2	3	4	5	6				
TOTALS								A	0	B	0

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

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TRANSFERS RECEIVED

S-T-Rcv
(15/06)

NAME OF FILING ENTITY
Rob Clarke-BC Libertarian Party-Mid Island-Pacific Rim

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OF

DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
TOTAL		A <input type="text" value="0"/>

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TRANSFERS GIVEN

S-T-Giv
(15/06)

NAME OF FILING ENTITY

Bob Clarke-BC Libertarian Party-Mid Island-Pacific Rim

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DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
TOTAL		A 0

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The information will be used to administer provisions under the *Election 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