



ELECTIONS BC
A non-partisan Office of the Legislature

ELECTION FINANCING REPORT POLITICAL PARTY

F-P
(15/09)

Amendment # _____

REGISTERED POLITICAL PARTY <i>BC First Party</i>		GENERAL VOTING DAY (YYYY / MM / DD) <i>2017 / 05 / 09</i>	
FINANCIAL AGENT'S LAST NAME <i>McDONALD</i>	FIRST NAME <i>RENEE</i>	MIDDLE NAME(S) <i>JOHANNA</i>	
FINANCIAL AGENT'S MAILING ADDRESS <i>866 West King Edward Avenue</i>			
CITY / TOWN <i>Vancouver</i>	POSTAL CODE <i>V5Z 2E1</i>	PHONE NO. <i>778-922-2185</i>	FAX NO.
EMAIL <i>rbdynamics@gmail.com</i>			

This financing report includes the following forms:

**FORMS
CHECKLIST**

		X
Statement of Election Income and Expenses –	Form St-I&E-E	<input checked="" type="checkbox"/>
Summary of Expenses –	Form Sm-E	<input checked="" 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 checked="" type="checkbox"/>
Permitted Anonymous Contributions Accepted at Functions –	Form S-A2	<input checked="" type="checkbox"/>
Prohibited Contributions –	Form S-Ax	<input checked="" type="checkbox"/>
Summary of Fundraising Functions –	Form Sm-F	<input checked="" 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"/>

I, the Financial Agent, declare that:

- (a) I am authorized to act on behalf of the above-named organization;
- (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 / 05 / 08

WARNING: Signing a false statement is a serious offence and is subject to significant penalties.

This form is available for public inspection.
PLEASE KEEP A COPY FOR YOUR RECORDS.

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Elections BC 1-800-661-8683, privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6



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STATEMENT OF ELECTION INCOME AND EXPENSES

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

GENERAL VOTING DAY (YYYY / MM / DD)

NAME OF FILING ENTITY

BC First Party

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

20.00

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

0.00

Interest income

0.00

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

0.00

Candidate's nomination deposit refund

0.00

Other income (describe)

0.00

Total Income (sum of above boxes)

20.00

A

Total value of election expenses subject to limits (from box A on form Sm-E)

0.00

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

0.00

Total value of other expenses (from box C on form Sm-E)

0.00

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

0.00

Total Expenditures (sum of above boxes)

0.00

B

For Candidates Only

Balance in campaign account as of date of report

20.00

C

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SUMMARY OF EXPENSES

Sm-E
(15/08)

NAME OF FILING ENTITY

Election Expenses

Election Expenses Subject to Limits

Election Expenses Not Subject to Limits

Other Expenses

Accounting and audit services			0.00
Bank charges			
Candidate's nomination deposit			
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			
Newsletters and promotional material (signs, brochures, etc.)			
Office rent, utilities and maintenance			
Office supplies, stationery			
Personal expenses of candidate (from box G, form Sm-PE1)			
Postage and courier			
Professional services			
Research and polling			
Salaries and benefits			
Social functions / thank-you parties			
Telecommunications			
Travel			
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	A	B	C

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Elections BC 1-800-661-8883 privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6



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SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C
(15/07)

If form is for Nomination Contestant, please tick ☐

NAME OF FILING ENTITY

BC First Party

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

	Contributions greater than \$250		Contributions of \$250 or less	
Individuals		1a	20.00	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)

Classified totals
(A + B)

20.00 C

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

0.00 D

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

20.00 E

Total contributions of money

20.00 F

Total contributions of goods, services and discounts
(includes contributions through loans and debts)

0.00 G

(boxes F + G must equal box E)

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

1 H

Total dollar amount of all income tax receipts issued
(Leadership Contestants cannot issue tax receipts)

\$ 20.00 I

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

S-A1
(15/06)

If form is for Nomination Contestant, please tick ☐

NAME OF FILING ENTITY

BC First Party

PAGE

OF

FULL NAME OF CONTRIBUTOR (If a numbered 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			
NOT APPLICABLE									

*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

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S-A2
(15/06)

If form is for Nomination Contestant, please tick ☐

NAME OF FILING ENTITY

BC First Party

PAGE

CF

DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
	NOT APPLICABLE		
TOTAL			A

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S-Ax
(15/09)

BC Fr 84 Berly

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OF

DATE RECEIVED (YYYY/MM/DD)	CIRCUMSTANCES	AMOUNT	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO CHIEF ELECTORAL OFFICE (YYYY/MM/DD)
	NOT APPLICABLE				
TOTAL		A			

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ELECTIONS BC
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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

BC First Party

Number of fundraising functions held

1

Total gross fundraising function income (sum of boxes M on all S-F forms)

0.00

A

Total cost of fundraising functions (sum of boxes N on all S-F forms)

B

Total net income (or loss) from fundraising functions (A - B)

C

Total amount of gross income reported as political contributions
(sum of boxes G on all S-F forms)

D

Total amount of gross income NOT reported as political contributions
(sum of boxes L on all S-F forms)

0.00

E

(boxes D + E must equal box A)

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

0.00

F

Total cost of fundraising functions held outside the
campaign period

G

Total net losses of fundraising functions which incurred
net losses during the campaign period

0.00

H

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