F-C (15/09)

ELECTION FINANCING REPORT CANDIDATE



Amendment#____

n-partisan Office of the Legislature					
CANDIDATE'S LAST NAME BURTON		FIRST NAME SCOTT		MIDDLE NAME DANIEL	(S)
electoral district LANGFORD-JDF Juan de Fuca	POLITICAL PARTY/AFFILIAT BC LIBERTARIAN	TON	GENERAL VOTI 2017/05/25	ING DAY (YYYY / MM / E 3- 09)D)
FINANCIAL AGENT'S LAST NAME BURTON		FIRST NAME SCOTT		MIDDLE NAME	(S) "
FINANCIAL AGENT'S MAILING ADDRESS 3259 WALFRED PL			CITY/TOWN LANGFOR	D	
POSTAL CODE PHONE NUMBER 2508583348	FAX NUMBER	EMAIL ADDRESS SCOTTBURTON@	HOTMAIL.C	A A	
This financing report includes the following	j forms:				FORMS CHECKLIST
Politica	Summary of al Contributions of Mone ermitted Anonymous Cor Personal E Perso Su	of Political Contribution by / Property / Services by / Property / Services by Frohibited Co by Final by Final by Final by Final by Findraising control by Fundraisin	Expenses – ss by Class – over \$250 – t Functions – ontributions – ncial Agent – Candidate – p Functions – g Function – Guarantees –	Form St-I&E-E Form Sm-C Form S-A1 Form S-A2 Form S-Ax Form Sm-PE1 Form Sm-PE2 Form Sm-F Form S-F Form S-L1 Form S-L2 Form S-T-Rcv Form S-T-Giv	NA BABABABABABABABABABABABABABABABABABAB
Politic	Summary of Summary of al Contributions of Mone ermitted Anonymous Cor Personal E Persor	ntributions Accepted at expenses Paid by Final nal Expenses Paid by ummary of Fundraising	ns by Class – s over \$250 – t Functions – ncial Agent – Contestant –	Form Sm-E-NC Form Sm-C Form S-A1 Form S-A2 Form Sm-PE1 Form Sm-PE2 Form Sm-F	
I, the Financial Agent, declare that: (a) I am authorized to act on behalf of the a (b) this report and appropriate forms have b (c) to the best of my knowledge, information SIGNATURE OF FINANCIAL AGENT	een prepared in accorda	nce with the Election A nation contained in this	oct, and statement is o	DATE (YYYY/MM/D 2017/08/01	



ELECTION FINANCING REPORT CANDIDATE

F-**C** (15/09)

Amendment # A non-partisan Office of the Legislature FIRST NAME MIDDLE NAME(S) CANDIDATE'S LAST NAME BURTON DANJÉL SCOTT ELECTORAL DISTRICT GENERAL VOTING DAY (YYXY / MM / DD) POLITICAL PARTY/AFFILIATION LANGFORD-JDF **BC LIBERTARIAN** 2017/05/23 FINANCIAL AGENT'S LAST NAME FIRST NAME MIDDLE NAME(S) **BURTON** SCOTT FINANCIAL AGENT'S MAILING ADDRESS CITY / TOWN 3259 WALFRED PL LANGFØRD POSTAL CODE FAX NUMBER EMAIL ADDRESS PHONE NUMBER SCOTTBURTON@HOTMAIL.CA V9C 1 4M4 2508583348 **FORMS** This financing report includes the following forms: CHECKLIST All Candidates: Х Statement of Election Income and Expenses -NA BODD OF DESTRUCTION OF THE PROPERTY OF THE Form St-I&E-E Summary of Expenses -Form Sm-E Summary of Political Contributions by Class -Form Sm-C Political Contributions of Money / Property / Services over \$250 -Form S-A1 Permitted Anonymous Contributions Accepted at Functions -Form S-A2 Prohibited Contributions -Form S-Ax Personal Expenses Paid by Financial Agent -Form Sm-PE1 Personal Expenses Paid by Candidate -Form Sm-PE2 Summary of Fundraising Functions -Form Sm-F SEE AMENDMENT Fundraising Function -Form S-F Loans and Guarantees --Form S-L1 Form S-L2 Loans / Debts Forgiven / Written Off -Transfers Received -Form 8-T-Rcv Transfers Given -Form S-T-Giv Candidates Who Were Nomination Contestánts: Nomination Contestant Expenses - Form Sm-E-NC Summary of Political Contributions by Class -Form Sm-C Political Contributions of Money / Property / Services over \$250 -Form S-A1 Permitted Anonymous Contributions Accepted at Functions -Form S-A2 Personal Expenses Paid by Financial Agent -Form Sm-PE1 Personal Expenses Paid by Contestant -Form Sm-PE2 Summary of Fundraising Functions -Form Sm-F Form S-F Fundraising Function -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)

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

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 Election Act and the Freedom of Information and Protection of Privacy Act.

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

2017/08/01



STATEMENT OF ELECTION INCOME AND EXPENSES



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

NAME OF FILING ENTITY C		
Scott Burton		
Total value of political contributions from all sources (from box E on form Sm-C)	200	
Total transfers received (from box A on form S-T-Rcv)	250	
Interest income		
Total gross fundraising function income not reported as political contributions (from box E on form Sm-F)		
Candidate's nomination deposit refund		
Other income (describe)		
Total Income (sum of above boxes)	450	Α
Total value of election expenses subject to limits (from box A on form Sm-E)	202	
Total value of election expenses not subject to limits (from box B on form Sm-E)	474	
Total value of other expenses (from box C on form Sm-E)	Ø	
Total transfers given (from box A on form S-T-Giv)	Ø	
Total Expenditures (sum of above boxes)	676	В
For Candidates Only		
Balance in campaign account as of date of report	Ø	С



STATEMENT OF INCOME AND EXPENSES

St-I&E-R (16/03)

SEE AMENDMENT

NAME OF FILING ENTITY SCOH SUCTOO	
Total value of contributions from all sources (from box E on Sm-C-R)	200
Interest income	0
Total gross fundraising function income not reported as contributions (from box E on Sm F-R)	U
Other income (describe)	0
Total Income (sum of above 4 boxes)	100 A
Total value of recall or initiative expenses subject to limits (from box A on Sm-E-R)	Tot
Total value of recall or initiative expenses not subject to limits (from box B on Sm-E-R)	0
Total other expenses (from box C on Sm-E-R)	0
Total Expenditures (sum of above 3 boxes)	LOT B
Surplus (Deficit) (A – B)	-'} c

SUMMARY OF EXPENSES



NAME OF FILING ENTITY Scott Burton			
Election Expenses	Election Expenses Subject to Limits	Election Expenses Not Subject to Limits	Other Expenses
Accounting and audit services			
Bank charges			
Candidate's nomination deposit		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	80		
Newsletters and promotional material (signs, brochures, etc.)	122		
Office rent, utilities and maintenance			
Office supplies, stationery			
Personal expenses of candidate (from box G, form Sm-PE1)		224	
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	202 A	474 B	Øc

SUMMARY OF EXPENSES





Recall or Initiative Expenses Subject to Limits	R	ecall or Initiative Expenses t Subject to Limits	•	ther enses
Expenses Subject to Limits		Expenses /		
Expenses Subject to Limits		Expenses /		
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# ELECTIONS BG

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### SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

If form is for Nomination Contestant, please tick  $\square$ 

NAME OF FILING ENTITY Scott Burton							
Total value of contributions from each of the following classes of contributor:							
	Contributions greater than \$250		Contributions of \$250 or less				
Individuals		1a	200	1b			
Corporations		2a		2b			
Unincorporated Business / Commercial Organizations		3а		3b			
Trade Unions		4a		4b			
Non-profit Organizations		ба		5b			
Other Identifiable Contributions		6a		6b			
Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1)	Ø	A	200	В			
Classified totals (A + B) 200 c							
Total anonymous contributions (from box A, S-A2)							
Total value of all political contributions from all sources (C + D)							
Tot	al contributions of m	oney	200	F			
Total contributions of good (includes contributions		Ø	G				
			(boxes F + G must equal	oox ⊨)			
Number of contributors of S	s who made contribu \$250 or less in total v			н			
Total dollar amount of all ir (Leadership Contestants			\$ Ø	1			



### SUMMARY OF CONTRIBUTIONS BY CLASS

Sm-C-R (18/03)

SEE AMENDMENT

NAME OF FILING ENTITY				<del>/</del>			
SCOTT BURTON							
Total value of contributions from each of the following classes of contributor:							
	Contributions greater than \$250		Contributions of \$250 or less	_			
Individuals	0	1a	200	1b			
Corporations	9/	2a	0	2b			
Unincorporated Business / Commercial Organizations	/0	3a	0	3b			
Trade Unions	0	4a	0	4b			
Non-profit Organizations	0	5a	0	5b			
Other Identifiable Contributions	0	6a	0	6b			
Classified subtotals (1a to 6a & 1b to 6b)			Λ				
(box A = box A, S-A1-R)	0	Α	1/00	В			
Classified totals (A + B)							
Total anonymous contributions (from box A, S-A2-R)							
Total value of all contributions from all sources (C + D)							
Total contributions of money 200 F							
Total contributions of goods, services and discounts (includes contributions through loans and debts)  (boxes F + G must equal box E)							
Number of contributors who made contributions of \$250 or less in total value							



NAME OF FILING ENTITY

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

**S-A1** (15/06)

PAGE

If form is for Nomination Contestant, please tick

Scott	Bur	to	n						OF (
FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated	C	LASS X APP	ASS OF CONTRIBUTOR* APPROPRIATE CLASS)			R* S)	INDIVIDUAL CONTRIBUTION	DATE OF EACH INDIVIDUAL CONTRIBUTION	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
organization, include full names of two directors)	1	2	3	4	5	6	AMOUNTS	(YYYY/MM/DD)	CONTRIBUTIONS
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* CLASS OF CONTRIBUTOR: 1 – INDIVIDUAL, 2 – CORPORATION, 3 – UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZ	ATION			TO	TAL VIDU	OF JAL	A Ø		
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER		c	ON.	TRIB	UTIC	NS			

# ELECTIONS A non-partisan Office of the Legislature

### **CONTRIBUTIONS OF MONEY GREATER THAN \$250**

**ADVERTISING SPONSOR** 

S-A1(b)R

SEE AMENDMENT

ELECTIONS (1994) A non-partisan Office of the Legislature							and a second of the Second of		
NAME OF FILING ENTITY SCOTT BURTON									PAGE OF
FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated organization, include full names of two directors)	CL (X		OF COPR		IBUTO CLASS		INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION (YY) (MM/DD)	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
Name had been transcribed to the control of the con	×	2	-	-	3				
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	-								
CLASS OF CONTRIBUTOR: 1 — INDIVIDUAL, 2 — CORPORATION, 3 — UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATIO 4 — TRADE UNION, 5 — NON-PROFIT ORGANIZATION, 6 — OTHER	DN,	C		INDI	TAL C	4L   A	6		

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

This information is collected under the authority of the Recall and Initiative Act and the Freedom of Information and Protection of Privacy Act. The Information will be used to administer provisions of the Recall and Initiative Act. Questions can be directed to: Privacy Officer, Elections BC 1-800-661-8683, <a href="mailto:privacy@elections.bc.ca">privacy@elections.bc.ca</a> or PO Box 9275 Stn Prov Govt, Victoria BC V8W 3J8



NAME OF FILING ENTITY

### PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2 (15/06)

If form is for Nomination Contestant, please tick  $\Box$ 

	Scott Burton			OF	
DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AN CON	AMOUNT OF ONYMOUS TRIBUTIONS	
-					
		TOTAL	A		Ø



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

NAME OF FILING ENTITY

### PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

SEE AMENDMENT

This information is collected under the authority of the Recall and Initiative Act and the Freedom of Information and Protection of Privacy Act. The Information will be used to administer provisions of the Recall and Initiative Act. Questions can be directed to: Privacy Officer, Elections BC 1-800-681-9883, privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6

S-A2-R	
£16/03)	
710/03)	

	SCOTT BURTON			OF
DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AND CONT	AMOUNT OF NYMOUS RIBUTIONS
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				······································
		TOTAL	A	0
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#### **PROHIBITED CONTRIBUTIONS**



	-	,
NAME OF FILING ENTITY	PAGE	
SCOTT BURTON	OF	
	J	L

		I	1		
DATE RECEIVED (YYYY/MM/DD)	CIRCUMSTANCES	AMOUNT	DATE RETURNED (YYYY/MM/DD)	OR DATE REMITTED TO CHIEF ELECTORAL OFFICE (YYYY/MM/DD)	
-					
	TOTAL	A ()			

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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  $\Box$ 

NAME OF FILING ENTITY SCOTT Burton		
Paid by the Financial Agent	_	
A. Transportation to, from or within electoral district	Air travel	
	Bus, taxi	
	Rental vehicle	
	Private vehicle	
Other (describe)		
	Total	ØA
B. Cost of lodging, meals and incidental expenses while travelling	Hotel, motel	
	Meals	
Incidental expenses (describe)		
	Total	. Ø в
C. Cost of renting a necessary temporary residence	Rent	Ø c
D. All other necessary personal expenses related to	Family care	
campaign or contest	Disability expenses	
	Total	ØD
E. Total personal expenses paid by the financial agent	Total of items A to D	ØE
F. Total personal expenses paid out of pocket by candidate or contestant	From Sm-PE2, box E	224 F
G. Total personal expenses from Sm-PE1 and Sm-PE2	Total of items E + F	224 G



#### PERSONAL EXPENSES PAID BY FINANCIAL AGENT

Sm-PE1-R (16/03)

(Personal expenses of authorized participant which were paid by the financial agent)

NAME OF FILING ENTITY SCOTE BUTTON.		
Paid by the Financial Agent		
A. Transportation to, from or within electoral district	Air travel	
ARTS, teneral advocate on a per personal as a series, the det disorder that it describes the in-	Bus, taxi	
SEE AMENDMENT	Rental vehicle	
	Private venicle	
Other (describe)		
	Total	
B. Cost of lodging, meals and incidental expenses while travelling	Hotel, motel	
	Meals	
Incidental expenses (describe)	<i>e</i>	
	Tatal	
	Total	() B
		1.1
C. Cost of renting a necessary temporary residence	Rent	C
D. All other necessary personal expenses related to	<b>F1</b>	
recall petition	Family care	
	Disability expenses	
	Total	() D
	pro	~ 1 1
E. Total personal expenses paid by the financial agent	Total of items A to D	() E
F. Total personal expenses paid out of pocket	<u> </u>	
by authorized participant	From Sm-PE2-R, box E	() [F]
G. Total personal expenses from Sm-PE1-R and Sm-PE2-R	Total of items E + F	() G
G. Total personal expenses from one-FET-R and othe-FEZ-R	IO(d) OI I(d) II & I I	<u> </u>

#### Sm-PE2 (15/06)

### PERSONAL EXPENSES PAID BY CANDIDATE / CONTESTANT



(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  $\Box$ 

NAME OF FILING ENTITY Scott Burton			
Paid by the Candidate or Contestant			-
A. Transportation to, from or within electoral district	Air travel		
	Bus, taxi		
	Rental vehicle		
	Private vehicle	80	
Other (describe)		144	
	Total	224	A
D. O. d. of ladvice, assale and incidental expanses while travalling	Hotel, motel		]
B. Cost of lodging, meals and incidental expenses while travelling	Meals		
Incidental expenses (describe)	Weats		
	Total	Ø	В
C. Cost of renting a necessary temporary residence	Rent	Ø	С
D. All other necessary personal expenses related to campaign or contest	Family care		
campaign or contest	Disability expenses		
	Total	Ø	D
E. Total personal expenses paid by candidate or contestant	Total of items A to D	224	E

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Elections BC 1-800-661-8683 <a href="mailto:privacy@elections.bc.ca">privacy@elections.bc.ca</a> or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6



### PERSONAL EXPENSES PAID BY AUTHORIZED PARTICIPANT

Sm-PE2-R (19/03)

(This form must be completed by the authorized participant and submitted to the financial agent)

NAME OF FILING ENTITY SCOTT BURTON		
Paid by the Proponent or MLA		
A. Transportation to, from or within electoral district	Air travel	
	Bus, taxi	
SEE AMENDMENT	Rental vehicle	0
Poly Book Book I of the group a to be a second a m	Private yehicle	\$80
Other (describe) BC FERRIES		\$144
	Total	\$174 A
B. Cost of lodging, meals and incidental expenses while travelling	Hotel, motel	
	Meals	
Incidental expenses (describe)		
	Total	( ) B
	,	
C. Cost of renting a necessary temporary residence	Rent	O c
D. All other necessary personal expenses related to petition	Family care	
	Disability expenses	
	Total	(d)
	1	
E. Total personal expenses paid by authorized participant	Total of items A to D	51h4 E



## el ectionis

### SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY			
SCOTT BURTON			
Number of fundraising functi	ons held	0	
Total gross fundraising function income (sum of boxes M on all S-	F forms)	0	Α
Total cost of fundraising functions (sum of boxes <b>N</b> on all <b>S</b> -	F forms)	0	В
Total net income (or loss) from fundraising functions	s (A – B)	0	С
Total amount of gross income reported as political cont (sum of boxes <b>G</b> on all <b>S</b> -	ributions F forms)	0	D
Total amount of gross income NOT reported as political cont (sum of boxes L on all S-	ributions F forms)	0	Е
	(boxes D	+ E must equal bo	эх <b>А</b> )
ompleting this section)  Total cost of fundraising functions held d	uring the	ion Guide be	fore
campaig  Total cost of fundraising functions held ou	uring the	ion Guide be	

#### **FUNDRAISING FUNCTION**

**S-F** (15/07)

(Submit a separate form for each function held)

1
ELECTIONS
A non-partisan Office of the Legislature

ELECTIONS If for	rm is f	or <u>Nomination C</u>	ontestant, please ti	ck 🗖		PAGE	
non-partisan Office of the Legislature						OF	
NAME OF FILING ENTITY							
SCOTT BURTON							
DATE OF EVENT (YYYY/MM/DD) DESC	CRIPTION	OF FUNDRAISING EVE	NT (IF A JOINT EVENT, IDEN	ITIFY OTHER ENTITY)		,	
Gross income reported as political co	ontribu	tions					
					_	Tick if	
		Number of Tickets Sold	Charge per Ticket	Total Charges Collected	С	harge pe Ticket Varies	r
	Г		·				
Purchases by organiza	itions				Α		
Purchases by individuals of more					В		
\$250 worth of tio	F-				H		
Purchases by individuals of tion that are more than \$50	each				С		
	_						
Other gross income reported as contrib	utions,	including anonymo	ous contributions (provi	ide full details)			
					ם		
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					E		
					F		
					Ш		
Total gross	incomo	reported as politic	al contributions (A + B	+ C + D + E + E)		0	G
Total gross	IIICOIIIC	reported as politic	ai contributions (7.1. B				
Out to impose that the malitime	1	uibutiono					
Gross income not reported as politic	ai con	เทอนแอกร				Tick if	
		Number of	Charge	Total Charges	С	harge pe Ticket	r
		Tickets Sold	per Ticket	Collected		Varies	
Purchases by individua	als of				н		
tickets of \$50 or					<u></u>		
Other gross income not reported as cor	ntributio	ne (provide full del	taile)				
Other gross ricome not reported as cor	inispano	ins (provide rail de	lano)		Τ.]		
					J		
					+		
					K		
Total ç	gross in	come not reported	as political contributio	ns (H + I + J + K)		0	L
							$\dashv$
			Total gros	ss income (G + L)		0	М
			Tot	al cost of function		0	N
			100	2. 5501 0. 1011011011			
			Net income	(loss) (box M-N)		0	0
					t		

#### LOANS AND GUARANTEES



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NAME OF FILING ENTITY			PAGE	 ĺ
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	SCOTT	burion	OF	
1				•

	<del></del>	_								1	T	T	r	A	В	C
DATE RECEIVED (YYYY/MM/DD)	FULL NAMES OF LENDER AND/OR GUARANTOR		1 .	()	ASS* X)	т	т	CONDITIONS (if applicable)	DUE DATE (YYYY/MM/DD)	ORIGINAL AMOUNT OF LOAN/GUARANTEE \$	AMOUNT OF LOAN OUTSTANDING \$	INT. RATE %	PRIME RATE %	AMOUNT OF INTEREST PAYABLE AT PRIME RATE	AMOUNT OF INTEREST BEING CHARGED \$	BENEFIT/ CONTRIBUTION (A - B) \$
		1	2	3	4	5	6			,				\$	*	4
										,						
											Ē					
* CLASS OF CONT 1 - INDIVIDUAL, 4 - TRADE UNIO	TRIBUTOR: 2 — CORPORATION, 3 — UNINCORPORATED BUSI N, 5 — NON-PROFIT ORGANIZATION, 6 — OTHER	NESS	S/CON	MER	RCIAL	ORG	SANIZ	ATION,	TOTAL	D Ø	E Ø				TOTAL	f Ø

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NAME OF FILING ENTITY

#### **LOANS AND GUARANTEES**

SEE AMENDMENT

S-L1-R	
(16/03)	

		SCOTT BUR	TOI	N													OF	
DATE RECEIVED (YYYY/MM/DD)	FULL NAMES OF AND GUARA	LENDER NTOR	1	2		ASS* K)	5	6	CONDITIONS (if applicable)	LOAN/GU	SINAL INT OF ARANTEE \$	AMOUNT OF LOAN OUTSTANDING \$	INT. RATE %	PRIME RATE	AMOUNT OF INTEREST PAYABLE AT PRIME RATE \$	AMOUNT OF INTEREST BEING CHARGED \$	BENEFITI CONTRIBUTI (A - B) \$	/ 10N
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	and the second s										,							
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* CLASS OF CO. 1 - INDIVIDUAL 4 - TRADE UNI	NTRIBUTOR: -, 2 - CORPORATION, 3 - UNI ON, 5 - NON-PROFIT ORGAN	NCORPORATED BUSIN IZATION, 6 - OTHER	NESS	/COM	MER	CIAL	ORG	ANIŻ	ration, TOTAL	D	0	E O				TOTAL	F (	<u>)</u>



### LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

**S-L2** (15/09)

	NAME OF FILING ENTITY Scott Bur	to	n								PAG		
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#### LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

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