



ELECTION FINANCING REPORT

CANDIDATE

F-C
(18/01)

ELECTIONS
A non-partisan Office of the Legislature

Amendment # _____

CANDIDATE'S LAST NAME RICHARDSON		FIRST NAME ROBIN	MIDDLE NAME(S) MARK
ELECTORAL DISTRICT NANAIMO	POLITICAL PARTY/AFFILIATION THE VANISLE PROVINCE PARTY		GENERAL VOTING DAY (YYYY / MM / DD) 2019 / 01 / 30
FINANCIAL AGENT'S LAST NAME RICHARDSON		FIRST NAME ROBIN	MIDDLE NAME(S) MARK
FINANCIAL AGENT'S MAILING ADDRESS 143-7 CHIEF ROBERT SAM LANE			CITY / TOWN VICTORIA BC
POSTAL CODE V9A 1T3	PHONE NUMBER (250) 388-4274	FAX NUMBER /	EMAIL ADDRESS rmpich@telus.net

This financing report includes the following forms:		FORMS CHECKLIST X
These forms must be included in all reports.	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"/>
These forms only need to be filed if there is information to report.	Summary of Political Contributions	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"/>
	Personal Expenses of the Candidate	Form Sm-PE <input checked="" type="checkbox"/>
	Summary of Fundraising Functions	Form Sm-F <input checked="" type="checkbox"/>
	Fundraising Function	Form S-F <input checked="" type="checkbox"/>
	Loans and Guarantees	Form S-L <input checked="" type="checkbox"/>
	Transfers Received and Given	Form S-TRF <input checked="" type="checkbox"/>
	Summary of Claim for Reimbursement of Election Expenses	Form Sm-CR <input checked="" type="checkbox"/>
Details of Claim for Reimbursement of Election Expenses	Form S-CR <input checked="" type="checkbox"/>	
Only complete if the candidate ran in a nomination contest.	Nomination Contestant Expenses	Form Sm-E-NC <input type="checkbox"/>
	Summary of Political Contributions	Form Sm-C <input 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 of the Contestant	Form Sm-PE <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 Ron Richardson	DATE (YYYY / MM / DD) 2019/04/29
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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
(18/01)

GENERAL VOTING DAY (YYYY / MM / DD)
2019/01/30

NAME OF FILING ENTITY
ROBIN MARK RICHARDSON THE VANISLE PROVINCE PARTY

Total value of political contributions from all sources (box D, Sm-C) 4,059.⁰⁰

Total transfers received (box A, S-TRF) 600.⁰⁰

Interest income -

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

Candidate's nomination deposit refund -

Other income (describe) -

Total Income (sum of above boxes) 4,659.⁰⁰ \$0.00 A

Total value of election expenses subject to limits (box A, Sm-E) 2,896.¹⁰

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

Total value of expenses not used during campaign period (box C, Sm-E) -

Total transfers given (box B, S-TRF) -

Total Expenditures (sum of above boxes) 2,896.¹⁰ \$0.00 B

For Candidates Only

Withdrawals

\$4,200.⁰⁰
- 175.⁰⁰
4,375.⁰⁰

- Closed Account Balance

Balance in campaign account as of date of report 0 C

Closed 2019/01/29

NAME OF FILING ENTITY

ROBIN MARK RICHARDSON

THE VANISLE PROVISIONAL PARTY

	Election expenses used during campaign period		Expenses not used during campaign period
	Subject to limits	Not subject to limits	
Accounting and audit services	✓		
Bank charges	21.50		
Candidate's nomination deposit	✓		
Convention, workshop and meeting fees and rentals	✓		
Donations and gifts	-		
Excess nomination expenses (box D, Sm-E-NC)	-		
Furniture and equipment	-		
Insurance	✓		
Interest expense	-		
Media advertising	2,341.34		
Newsletters and promotional material (signs, brochures, etc.)	-		
Office rent, utilities and maintenance	✓		
Office supplies, stationery	-		
Personal expenses of candidate (box F, Sm-PE)	-		
Postage and courier	✓		
Professional services	496.75		
Research and polling	✓		
Salaries and benefits	-		
Social functions/thank-you parties	✓		
Telecommunications/information technology	✓		
Travel	✓		
Total cost of fundraising functions held during the campaign period (box F, Sm-F)	-		
Total cost of fundraising functions held outside the campaign period (box G, Sm-F)	✓		
Total net losses of fundraising functions which incurred net losses during the campaign period (box H, Sm-F)	-		
Other expenses (describe)			
Etteques/Deposit slips	36.51		
Total Expenses	2,896.10	\$ 0.00 A	\$ 0.00 B
			\$ 0.00 C

Photographer 296.75
Artist (Cartoon) 200.00
to 496.75



SUMMARY OF POLITICAL CONTRIBUTIONS

Sm-C
(17/12)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

ROBIN MARK RICHARDSON THE VANCOUVER PROVINCE PARTY

Contributions must be accepted only from eligible individuals.

	Number of contributors	Value of contributions (\$)	
Contributions greater than \$250	3	2,800. ⁰⁰	A
Contributions of \$250 or less	10	1,259. ⁰⁰	B
Anonymous contributions (box A, S-A2)		—	C
Total value of political contributions from all sources (A + B + C)		4,059. ⁰⁰	D

Total contributions of money	4,059. ⁰⁰	E
Total contributions of goods and services	—	F

(boxes E and F must equal box D)

Total dollar amount of income tax receipts issued (Leadership contestants cannot issue tax receipts)	\$ 4,059. ⁰⁰	G
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**POLITICAL CONTRIBUTIONS WITH A
TOTAL VALUE GREATER THAN \$250**

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
ROBIN MARK RICHARDSON THE VANISLE PROVINCE PARTY

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OF 6

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				INDIVIDUAL CONTRIBUTION AMOUNT	DATE RECEIVED (YYYY/MM/DD)	TYPE	FOR TYPES 1-5, DATE OF EVENT (YYYY/MM/DD)	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	ADDRESS	CITY	PROV.	POSTAL CODE					
<i>PHILIP NEY</i>					<i>1,200.00</i>	<i>2009/02/06</i>	<i>6</i>	<i>-</i>	<i>1,200.00</i>
<i>JOHN McLENNAN</i>					<i>1,200.00</i>	<i>2009/01/06</i>	<i>6</i>	<i>-</i>	<i>1,200.00</i>
<i>Louise Bo. Cheveldayoff</i>					<i>400.00</i>	<i>2009/01/10</i>	<i>6</i>	<i>-</i>	<i>400.00</i>

* TYPE OF CONTRIBUTION: 1 – Fundraising function ticket sold for more than \$250. 2 – Property/services purchased for more than \$250 above market value at a fundraising function, 3 – Property/services with a value greater than \$250 donated for sale at a fundraising function, 4 – Fees to attend a convention (political parties only) 5 – Fees to attend a leadership convention (political parties only), 6 – All other contributions received

TOTAL OF INDIVIDUAL CONTRIBUTIONS
A *2,800.00* \$ 0.00



**PERMITTED ANONYMOUS CONTRIBUTIONS
ACCEPTED AT FUNCTIONS**

S-A2
(15/06)

If form is for Nomination Contestant, please tick

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ROBIN MARK ROCHFORDSON
 NAME OF CONTRIBUTING ENTITY
 ROBIN & MIRA ROCHFORDSON THE VANISLE PROVINCE PARTY

PAGE 2
OF 1

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

TOTAL A \$ 0.00

This form is 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



PROHIBITED CONTRIBUTIONS

S-Ax
(17/12)

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ROBIN MARIE RICHARDSON
 NAME OF FILING ENTITY
 "Robin 4 MLA" ACCOUNT THE VANISSE PROV. ALL PARTY

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DATE RECEIVED (YYYY/MM/DD)	CIRCUMSTANCES	AMOUNT	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
		TOTAL	A		\$ 0.00

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**PERSONAL EXPENSES OF THE
CANDIDATE/CONTESTANT**

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

ROBIN MAZURKICHALSON
ROBIN 4 MLA ACCOUNT THE VANISSE PROVINCE PARTY

Transportation to, from or within electoral district

Paid by the
candidate or
contestant

Paid through
the campaign
account

Air travel

Bus, taxi

Rental vehicle

Private vehicle

Other (Describe)

Total

\$ 0.00

A1

\$ 0.00

A2

Cost of lodging, meals and incidental
expenses while travelling

Hotel, motel

Meals

Incidental expenses (Describe)

Total

\$ 0.00

B1

\$ 0.00

B2

Cost of renting a necessary temporary residence

Rent

C1

C2

All other necessary personal expenses
related to campaign/contest

Family care

Disability expenses

Total

\$ 0.00

D1

\$ 0.00

D2

Total (A + B + C + D)

\$ 0.00

E1

\$ 0.00

E2

Total personal expenses

Total (E1 + E2)

\$ 0.00

F



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SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Sm-F
(17/12)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY	
" <u>ROBIN 4 MLA ACCOUNT</u> <u>THE VANISLE PROVINCE PARTY</u>	
Number of fundraising functions held	<input type="text"/>
Total gross fundraising function income (sum of boxes L on all S-F forms)	<input type="text"/> A
Total cost of fundraising functions (sum of boxes M on all S-F forms)	<input type="text"/> B
Total net income (or loss) from fundraising functions (A - B)	\$ 0.00 C
Total amount of gross income reported as political contributions (sum of boxes F on all S-F forms)	<input type="text"/> D
Total amount of gross income NOT reported as political contributions (sum of boxes K on all S-F forms)	<input type="text"/> E
(boxes D + E must equal box A)	
For election financing reports only	
Total cost of fundraising functions held during the campaign period	<input type="text"/> F
Total cost of fundraising functions held outside the campaign period	<input type="text"/> G
Total net losses of fundraising functions which incurred net losses during the campaign period	<input type="text"/> H
For leadership contestant financing reports only	
Total net losses of fundraising functions which incurred net losses	<input type="text"/> I



FUNDRAISING FUNCTION

(Submit a separate form for each function held)

S-F
(18/01)

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If form is for Nomination Contestant, please tick

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NAME OF FILING ENTITY <u>ROBIN MARGE RICHARDSON</u>	
<u>ROBERT H. MCLAUGHLIN ACCOUNT THE VANISSE PROVINCE PARTY</u>	
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY)

If event is a specified fundraising function, tick box and attach Spec-FF form.

Gross income reported as political contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by eligible individuals of a single ticket for more than \$50			A	
Purchases by eligible individuals of more than one ticket			B	

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

	C
	D
	E

Total gross income reported as political contributions (A + B + C + D + E) \$ 0.00 F

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 eligible individuals of a single ticket for \$50 or less			G	

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

	H
	I
	J

Total gross income not reported as political contributions (G + H + I + J) \$ 0.00 K

Total gross income (F + K) \$ 0.00 L

Total cost of function M

Net income (loss) (L - M) \$ 0.00 N



PERMISSIBLE LOAN OR GUARANTEE

S-L
(18/01)

(Submit a separate form for each loan or guarantee)

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ROBERT MARIE RICHARDSON
NAME OF FILING ENTITY
Robson & MLA Account The VANISLE PROVINCE PARTY

Please indicate: LOAN GUARANTEE

NAME OF SAVINGS INSTITUTION MAKING LOAN OR GUARANTEE

DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)
ORIGINAL AMOUNT \$	PRIME INTEREST RATE %
AMOUNT OUTSTANDING \$	INTEREST RATE %

Complete dates only if applicable:

Default on loan	DATE (YYYY/MM/DD)
Call on guarantee for loan	DATE (YYYY/MM/DD)
Non-compliance date with terms and conditions	DATE (YYYY/MM/DD)



TRANSFERS RECEIVED AND GIVEN

S-TRF (17/12)

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NAME OF FILING ENTITY ROBIN MARK RICHARDSON THE VANISLE PROVINCE PARTY

PAGE OF

Table with 4 columns: DATE OF TRANSFER (YYYY/MM/DD), NAME OF ENTITY TRANSFER WAS RECEIVED FROM OR GIVEN TO, VALUE OF TRANSFER RECEIVED, VALUE OF TRANSFER GIVEN. Includes a row for 2019/06/26 with a value of 600.00 and a total row at the bottom.

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