

# 4220 - CAMPAIGN FINANCING DISCLOSURE STATEMENT

## LOCAL ELECTIONS CANDIDATE



PLEASE PRINT IN BLOCK LETTERS

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

CANDIDATE'S FULL NAME <b>Patricia Lynne Sinclair</b>		GENERAL VOTING DAY (YYYY/MM/DD) <b>2014/11/15</b>	
BALLOT NAME (IF DIFFERENT FROM ABOVE) <b>Lynne Sinclair</b>		OFFICE SOUGHT (MAYOR, COUNCILLOR ETC.) <b>Councillor</b>	
MAILING ADDRESS <b>15490 Columbia Ave</b>		PHONE NO. <b>604.340.2276</b>	
CITY / TOWN <b>White Rock</b>	POSTAL CODE <b>V4B 1K2</b>	EMAIL (IF AVAILABLE) <b>lynne.sinclair@shaw.ca</b>	
JURISDICTION <b>City of White Rock</b>			
ELECTORAL AREA/LOCAL TRUST AREA/TRUSTEE ELECTORAL AREA (IF APPLICABLE)			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>White Rock Coalition</b>			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE) <b>White Rock Coalition Society</b>			
FINANCIAL AGENT'S LAST NAME <b>Sinclair</b>	FIRST NAME <b>Patricia</b>	MIDDLE NAME <b>Lynne</b>	
FINANCIAL AGENT'S MAILING ADDRESS <b>15490 Columbia Ave</b>		PHONE NO. <b>604.340.2276</b>	
CITY / TOWN <b>White Rock</b>	POSTAL CODE <b>V4B 1K2</b>	EMAIL (IF AVAILABLE) <b>lynne.sinclair@shaw.ca</b>	
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD) <b>2014/10/01</b>	If there were previous financial agents, complete form 4236.		

Tick if candidate was registered as a third party sponsor

Tick if candidate acted as a campaign organizer

This disclosure statement includes the following forms:

- |  |  |
|--|--|
| Declarations and Campaign Accounts - Form 4221 <input checked="" type="checkbox"/>           | Summary of Election Expenses - Form 4229 <input checked="" type="checkbox"/>               |
| Statement of Income and Expenses - Form 4222 <input checked="" type="checkbox"/>             | Transfers Given to Elector Organization - Form 4230 <input checked="" type="checkbox"/>    |
| Summary of Campaign Contributions by Class - Form 4223 <input checked="" type="checkbox"/>   | Other Permissible Payments - Form 4231 <input checked="" type="checkbox"/>                 |
| Significant Contributors (\$100 or more) - Form 4224 <input checked="" type="checkbox"/>     | Shared Election Expense - Form 4232 <input checked="" type="checkbox"/>                    |
| Prohibited Campaign Contributions - Form 4225 <input checked="" type="checkbox"/>            | Transfers Between Candidate's Own Accounts - Form 4233 <input checked="" type="checkbox"/> |
| Transfers Received from Elector Organization - Form 4226 <input checked="" type="checkbox"/> | Disbursement of Surplus Funds - Form 4234 <input checked="" type="checkbox"/>              |
| Other Permissible Deposits - Form 4227 <input checked="" type="checkbox"/>                   | Free Advertising from Jurisdiction - Form 4235 <input checked="" type="checkbox"/>         |
| Fundraising Function Ticket Sales - Form 4228 <input checked="" type="checkbox"/>            | Previous Financial Agents - Form 4236 <input checked="" type="checkbox"/>                  |

**4221 - DECLARATIONS AND CAMPAIGN ACCOUNTS**  
**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE Patricia Lynne Sinclair
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**Declaration:**

I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the *Local Elections Campaign Financing Act* (LECFA).

SIGNATURE OF CANDIDATE 	DATE: (YYYY/MM/DD) 2015/01/22
PRINTED NAME OF CANDIDATE Patricia Lynne Sinclair	

SIGNATURE OF FINANCIAL AGENT 	DATE: (YYYY/MM/DD) 2015/01/22
PRINTED NAME OF FINANCIAL AGENT Patricia Lynne Sinclair	

**Campaign accounts:**

NAME OF SAVINGS INSTITUTION TD Canada Trust - White Rock Branch
ADDRESS 15110 North Bluff Road, White Rock, BC, V4B 3E5

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

NAME OF SAVINGS INSTITUTION
ADDRESS

## 4222 - STATEMENT OF INCOME AND EXPENSES

### LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE

Patricia Lynne Sinclair

Total value of campaign contributions from all sources (from box C on form 4223)	7,557.86
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Transfers received from elector organization (from box A on form 4226)	924.8
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Total other permissible deposits (from box A on form 4227)	0
--	---

Transfers from candidate's own accounts in other jurisdictions (from box A on form 4233)	0
--	---

<b>Total Income</b> (sum of above boxes)	<b>8,482.66</b>	<b>A</b>
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Election expenses (from box A on form 4229)	0
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Transfers to elector organization (from box A on form 4230)	7,557.86
---	----------

Total other permissible payments (from box A on form 4231)	0
--	---

Transfers to candidate's own accounts in other jurisdictions (from box B on form 4233)	0
--	---

Amount of surplus funds disbursed (from box A on form 4234)	924.8
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<b>Total Expenditures</b> (sum of above boxes)	<b>8,482.66</b>	<b>B</b>
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**4223 - SUMMARY OF CAMPAIGN CONTRIBUTIONS BY CLASS**

**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  
 Patricia Lynne Sinclair

		All Contributions	
	Individuals	6,827.86	
	Corporations	700	
	Unincorporated Business/Commercial Organizations	0	
	Trade Unions	0	
	Non-profit Organizations	0	
	Other Identifiable Contributors	0	
	<b>Total</b>	<b>\$ 7,527.86</b>	<b>A</b>

Anonymous contributions \$ 30 **B**

Total contributions (A + B) \$ 7,557.86 **C**

Total significant contributions (must equal box A on all forms 4224) \$ 7,217.86

Total contributions of less than \$100 \$ 340

Number of contributors who gave less than \$100 # 20

Number of anonymous contributors # 1

**4224 - SIGNIFICANT CONTRIBUTORS (\$100 OR MORE)****LOCAL ELECTIONS CANDIDATE**

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NAME OF CANDIDATE				PAGE
Patricia Lynne Sinclair				1
				OF
				1
DATE OF CONTRIBUTION (YYYY/MM/DD)	FULL NAME OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6, include full names of two directors)	ADDRESS OF CONTRIBUTOR (For class 2, 3, 4, 5 & 6 only)	CLASS*	VALUE OF CONTRIBUTION
2014/10/01	Lynne Sinclair	n/a	1	5,000
2014/10/01	Sight for Sore Eyes Optical	1187 Johnston Rd, White Rock	2	200
2014/10/11	420910 BC Ltd Directors: John Carrol	1136 Keil Cresc, White Rock V4B 4W	2	400
2014/10/14	Georgette Huxley	n/a	1	100
2014/10/19	Judy Chipperfield	n/a	1	100
2014/10/21	Barbara Cooper	n/a	1	100
2014/10/22	E. Kim Sinclair	n/a	1	217.86
2014/10/23	Coffee With Attitude Cafe; Proprietors	15202 Pacific Ave, White Rock	2	100
2014/10/23	Mary Brunet	n/a	1	100
2014/10/24	Muriel Wilkinson	n/a	1	100
2014/11/04	Brian Porter	n/a	1	100
2014/11/03	Kay Sinclair	n/a	1	200
2014/11/12	Vin Coyne	n/a	1	500
IF NEEDED, ATTACH ADDITIONAL FORMS			<b>TOTAL CONTRIBUTIONS</b>	<b>7,217.86</b>
*CLASS OF CONTRIBUTOR:			A	
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION				
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER IDENTIFIABLE CONTRIBUTOR				

# 4225 - PROHIBITED CAMPAIGN CONTRIBUTIONS

## LOCAL ELECTIONS CANDIDATE



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NAME OF CANDIDATE Patricia Lynne Sinclair	PAGE <span style="border: 1px solid black; padding: 2px;">1</span> OF <span style="border: 1px solid black; padding: 2px;">1</span>
<b>INSTRUCTIONS:</b> Complete one sheet for each prohibited campaign contribution received. Attach additional forms if necessary.	

RECEIVED FROM	DATE RECEIVED (YYYY/MM/DD)	\$ VALUE	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> ORGANIZATION <input type="checkbox"/> ANONYMOUS					
DESCRIPTION OF HOW THE PROHIBITED CONTRIBUTION WAS RECEIVED No prohibited campaign contributions were received					
<b>Complete this field if the prohibited campaign contribution was received from an individual:</b>					
NAME OF INDIVIDUAL					
<b>Complete these fields if the prohibited campaign contribution was received from an organization:</b>					
NAME OF ORGANIZATION					CLASS*
MAILING ADDRESS					
NAME OF DIRECTOR			NAME OF DIRECTOR		

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







# 4228 - FUNDRAISING FUNCTION TICKET SALES

## LOCAL ELECTIONS CANDIDATE

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SUBMIT A SEPARATE FORM FOR EACH FUNCTION HELD



NAME OF CANDIDATE <b>Patricia Lynne Sinclair</b>		PAGE <input style="width: 30px; text-align: center;" type="text" value="1"/>
		OF <input style="width: 30px; text-align: center;" type="text" value="1"/>
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT <b>No fundraising events were held by this candidate</b>	

  

**Income reported as campaign contributions**

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations				<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>
Total income reported as campaign contributions				<input type="checkbox"/>

  

Remember to report all campaign contributions on form 4223 - Summary of Campaign Contributions by Class, and if applicable, on form 4224 - Significant Contributors (\$100 or more).

  

**Other income not reported as campaign 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 type="checkbox"/>

**4229 - SUMMARY OF ELECTION EXPENSES**

**LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE

Patricia Lynne Sinclair

	Column A Election Expenses	Column B Election Proceedings Period Expenses
<b>ADVERTISING</b>		
Brochures, pamphlets and flyers	0	0
Internet	0	0
Newspaper, magazine, journal	0	0
Radio	0	0
Signs and billboards	0	0
Television	0	0
Other advertising	0	0
<b>CAMPAIGN ADMINISTRATION</b>		
Salaries and wages	0	0
Rent, insurance and utilities	0	0
Courier and postage	0	0
Furniture and equipment	0	0
Office supplies	0	0
Professional services	0	0
Other campaign administration expenses	0	0
Conventions and meetings	0	0
Other campaign related functions	0	0
Research and polling	0	0
Interest	0	0
<b>EXCLUSIONS THAT MUST BE REPORTED</b>		
Personal election expenses	0	
Interest on loans for election expenses	0	
Legal and accounting services	0	
Financial agent services	0	
Other expenses (describe) none	0	0
<b>Total Expenses</b>	<b>A</b> 0	<b>B</b> 0

Column A - Report the value of all election expenses for goods and services used in the campaign period. The campaign period is from January 1, 2014 to November 15, 2014.

Column B - Report the value of all election expenses for goods and services used in the election proceedings period. The election proceedings period is from September 30, 2014 to November 15, 2014.







**4233 - TRANSFERS BETWEEN CANDIDATE'S  
OWN CAMPAIGN ACCOUNTS  
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE  
Patricia Lynne Sinclair

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OF 1

**Transfers between candidate's own campaign accounts in same jurisdiction**

PURPOSE	AMOUNT
There were no transfers between this Candidate's own campaign accounts	

**Transfers from candidate's own campaign accounts in other jurisdictions**

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		<b>A</b>

**Transfers to candidate's own campaign accounts in other jurisdictions**

DATE OF TRANSFER (YYYY/MM/DD)	PURPOSE (INCLUDE NAME OF OTHER JURISDICTION)	AMOUNT
TOTAL		<b>B</b>

The amounts in boxes A and B must be carried forward to form 4222.







**4236 - PREVIOUS FINANCIAL AGENTS  
LOCAL ELECTIONS CANDIDATE**



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NAME OF CANDIDATE <b>Patricia Lynne Sinclair</b>			
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)
EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)			
FINANCIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME
FINANCIAL AGENT MAILING ADDRESS			PHONE NO.
CITY/TOWN		POSTAL CODE	EMAIL (IF AVAILABLE)