

**Instructions**

All registrants must complete Boxes A, B, C, D and E and Schedule 1. All registrants must complete Schedule 2 as appropriate. Registrants who receive contributions or incur expenses in excess of \$10,000 must also attach an Auditor’s Report.

All surplus funds (after any refund to the registrant or his or her spouse) shall be paid immediately over to the clerk who was responsible for the conduct of the election.

For the campaign period from 

YYYY	MM	DD
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 to 

YYYY	MM	DD
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- Primary filing reflecting finances to December 31 (or 45<sup>th</sup> day after voting day in a by-election)
- Supplementary filing including finances after December 31 (or 45<sup>th</sup> day after voting day in a by-election)

**Box A: Name of Registrant**

Name of Registrant					
Last Name		First Name		Middle Initial	
Mailing Address					
Suite/Unit No.	Street No.	Street Name			
City/Town			Province	Postal Code	
Telephone No. (incl. area code)		Fax No.		Email Address	
Business	Home				

Questions for which registrant is registered

Name of Municipality

**Box B: Summary of Campaign Income and Expenses**

1. My spending limit (as issued by clerk) was - - - - -	\$ <input style="width: 100%;" type="text"/>
2. Total contributions received (from Schedule 1) - - - - -	\$ <input style="width: 100%;" type="text"/>
3. My total campaign expenses that were subject to the spending limit were (from Box C) - - -	\$ <input style="width: 100%;" type="text"/>
4. My total campaign expenses that were not subject to the spending limit were (from Box C) - -	\$ <input style="width: 100%;" type="text"/>
5. Total of all campaign expenses (from Box C) - - - - -	\$ <input style="width: 100%;" type="text"/>
6. Campaign surplus/deficit (from Box C) - - - - -	\$ <input style="width: 100%;" type="text"/>
7. Contributions refunded to registrant or spouse - - - - -	\$ <input style="width: 100%;" type="text"/>
8. Amount paid to clerk - - - - -	\$ <input style="width: 100%;" type="text"/>

**Box C: Statement of Campaign Period Income and Expenses**

From YYYY	MM	DD	To YYYY	MM	DD	For Registrant
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**INCOME**

Contributions from registrant	- - - - -	+	\$
Contributions from spouse of registrant	- - - - -	+	\$
All other contributions	- - - - -	+	\$
Revenue from fund-raising functions not deemed a contribution (from Schedule 2, Part III)	- - - - -	+	\$
Interest income	- - - - -	+	\$
Other (provide full details)			
1.		+	\$
2.		+	\$
3.		+	\$

**Total Campaign Period Income** - - - - - = \$   **C1**

**EXPENSES (Note: include the value of contributions of goods and services)**

Expenses Subject to Spending Limit

Advertising	- - - - -	+	\$
Bank charges	- - - - -	+	\$
Brochures	- - - - -	+	\$
Interest on loan	- - - - -	+	\$
Meetings hosted	- - - - -	+	\$
Office expenses	- - - - -	+	\$
Phone and/or Internet	- - - - -	+	\$
Salaries and benefits/honoraria/professional fees	- - - - -	+	\$
Signs	- - - - -	+	\$
Other (provide full details)			
1.		+	\$
2.		+	\$
3.		+	\$
<b>Subtotal</b>	- - - - -	=	\$ <span style="border: 1px solid black; padding: 2px 20px;"> </span> <b>C2</b>

Expenses Not Subject to Spending Limit

Accounting and audit	- - - - -	+	\$
Costs of fund-raising function (from Schedule 2, Part IV)	- - - - -	+	\$
Expenses related to compliance audit	- - - - -	+	\$
Expenses related to controverted elections	- - - - -	+	\$
Expenses related to recounts	- - - - -	+	\$
Voting day party / appreciation notices	- - - - -	+	\$
Expenses related to registrant's disability (provide details)			
1.		+	\$
2.		+	\$
3.		+	\$
<b>Subtotal</b>	- - - - -	=	\$ <span style="border: 1px solid black; padding: 2px 20px;"> </span> <b>C3</b>

**Total Campaign Period Expenses (C2) + (C3)** - - - - - = \$   **C4**

**Excess (Deficiency) of Income over Expenses (C1) – (C4)** - - - - - = \$

**Box D: Statement of Assets and Liabilities as at \_\_\_\_\_, 20**

**Assets**

Cash	- - - - -	+	\$	
Accounts receivable	- - - - -	+	\$	
Value of inventory retained (from Schedule 4)	- - - - -	+	\$	
Other (provide full details)				
1.		+	\$	
2.		+	\$	
3.		+	\$	
<b>Total Assets</b>	- - - - -			= \$

**Liabilities and Excess (Deficiency) of Income over Expenses**

Accounts payable	- - - - -	+	\$	
Borrowings, overdraft	- - - - -	+	\$	
Other (provide full details)				
1.		+	\$	
2.		+	\$	
3.		+	\$	
<b>Total Liabilities</b>	- - - - -			= \$

**Box E: Declaration**

I, \_\_\_\_\_, a registrant in the municipality of \_\_\_\_\_, hereby declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct.

Declared before (clerk or commissioner)

in the \_\_\_\_\_  
on (yyyy/mm/dd) \_\_\_\_\_.



\_\_\_\_\_  
Signature of Clerk or Commissioner

\_\_\_\_\_  
Signature of Registrant

\_\_\_\_\_  
Date Filed in the Clerk's Office (yyyy/mm/dd)



**Table 2: Monetary contributions from unions or corporations**

Name (Legal and Carrying on Business As)	Address	President or Business Manager	Cheque Signatory	Amount
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Additional information is listed on separate supplementary attachment

**Total** \$

**Table 3: Contributions in goods or services (Note: must also be reported as expenses in Box C)**

Name	Address	Goods or Services	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Additional information is listed on separate supplementary attachment

**Total** \$

**Total Part II Contributions**

\$

**Schedule 2 – Fund-Raising Function**

Additional schedule for each event or activity held is/are listed on separate supplementary attachment(s)

Date			Description of event or activity
YYYY	MM	DD	

Admission charge (per person)\* (may not exceed individual contribution limit) - - - - - \$  **2A**  
 \*If admission charge per person is not consistent, attach complete breakdown of all ticket sales.

Number of tickets sold - - - - -  **2B**

**Part I – Ticket Revenue**

Lines: **(2A) x (2B)** (include in Schedule 1) - - - - - = \$

**Part II – Other Revenue Deemed A Contribution**

Provide full details (e.g., revenue from goods sold in excess of fair market value)

1.	- - - +	\$	<input type="text"/>
2.	- - - +	\$	<input type="text"/>
3.	- - - +	\$	<input type="text"/>
4.	- - - +	\$	<input type="text"/>
5.	- - - +	\$	<input type="text"/>
6.	- - - +	\$	<input type="text"/>
7.	- - - +	\$	<input type="text"/>
8.	- - - +	\$	<input type="text"/>
<b>Total Part II Revenue (include in Schedule 1)</b>	- - - - -	=	\$ <input type="text"/>

**Part III – Other Revenue Not Deemed A Contribution**

Provide full details (e.g., contributions of \$10 or less; revenue from refreshment sold at cost)

1.	- - - +	\$	<input type="text"/>
2.	- - - +	\$	<input type="text"/>
3.	- - - +	\$	<input type="text"/>
4.	- - - +	\$	<input type="text"/>
5.	- - - +	\$	<input type="text"/>
6.	- - - +	\$	<input type="text"/>
7.	- - - +	\$	<input type="text"/>
8.	- - - +	\$	<input type="text"/>
<b>Total Part III Revenue (include in Box C)</b>	- - - - -	=	\$ <input type="text"/>

**Part IV – Expenses Related to Fund-Raising Function**

Venue - - - - -	- - - - -	+	\$	<input type="text"/>	
Event advertising - - - - -	- - - - -	- - - - -	+	\$	<input type="text"/>
Food and drink - - - - -	- - - - -	- - - - -	+	\$	<input type="text"/>
Entertainment - - - - -	- - - - -	- - - - -	+	\$	<input type="text"/>
Other (provide full details)					

1.	- - - +	\$	<input type="text"/>
2.	- - - +	\$	<input type="text"/>
3.	- - - +	\$	<input type="text"/>
4.	- - - +	\$	<input type="text"/>
5.	- - - +	\$	<input type="text"/>
6.	- - - +	\$	<input type="text"/>
7.	- - - +	\$	<input type="text"/>
8.	- - - +	\$	<input type="text"/>
<b>Total Part IV Expenses (include in Box C)</b>	- - - - -	=	\$ <input type="text"/>

**Auditor's Report***Municipal Elections Act, 1996 (Section 78)*

A registrant who has received contributions or incurred expenses in excess of \$10,000 must attach an auditor's report. The report must be done in accordance with generally accepted auditing standards and must:

- set out the scope of the examination
- provide an opinion as to the completeness and accuracy of the financial statement and whether it is free of material misstatement

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Professional Designation of Auditor

Municipality		Date (yyyy/mm/dd)	
Contact Person Last Name		First Name	Licence No.
Address			
Suite/Unit No.	Street No.	Street Name	
City/Town		Province	Postal Code
Telephone No. (incl. area code) ext.	Fax No.		Email Address