A: Summary of Contributions and Expenses





Sun	nmary of Contributions	and the same of th	K		
1.	Named contributions (see B1)	\$	Q		
2.	Anonymous contributions (see B2)	\$	tie	cketto	Kugawal
3.	Goods and services contributions (see C3)	\$	Ø,	1100	
4.	Candidate's contributions, NOT reimbursed (see C4)	\$	\$		
5.	Total contributions (Add lines 1 + 2 + 3 + 4)	<u>?</u>			
Sun	nmary of Expenses (see D)				
6.	Ads & signs	\$			
7.	Salaries & allowances	\$			
8.	Office rent & utilities	\$			
9.	Travel	\$			
10.	Childcare & disability	\$			
11.	Other	\$			
12.	Total expenses (Add 6 + 7 + 8 + 9 + 10 + 11)	\$]
13.	Total Contributions (from line 5 above)	\$			
14.	Total Expenses (from line 12 above)	\$			
15.	Surplus or (Deficit): Contributions minus Expenses	\$	Ø		
Su	rplus: Check one box below to show what you did with the surplus.				
	Government of Nunavut. Attach the cheque or money order. Make it out to	'Consolidated Rever	nue Fund Nui	navut'	
	Charitable organization (on list of eligible groups). Attach the receipt, made	out to 'Campaign of		,	

A: Summary of Contributions and Expenses



Constituency:	Election Day:
Candidate's name & mailing address JOSEPH QUIGGIGG POBOX 33 TALOYORK NU 2013 15 2	Financial Agent's name & mailing address John Dilts Box 189 Taloyout WU XOBIBO
Candidate's Declaration I solemnly declare that I reviewed this financial return and that it is accurate and complete; it contains no false or misleading information. I declare this knowing that it has the same force and effect as if I made an oath under the Nunavut Evidence Act. At (community): Date (yyyy/mm/dd): 246 104- 28	Financial Agent's Declaration I solemnly declare that I prepared this financial return and that it is accurate and complete; it contains no false or misleading information. I declare this knowing that it has the same force and effect as if I made an oath under the Nunavut Evidence Act. At (community): Date (yyyy/mm/dd): 2016/04/08
Candidate's signature	Financial Agent's signature
Signature: Commissioner of Oaths, JP, Notary Public, or RCMP	Signature of Commissioner of Oaths, JP, Notary Public, or RCMP
St. SHANZS S7646 Date: 2016-04-08	Csl. SHANDS 57646 Dat: 2016-04-08

B-1: Financial Contributions—Named



Each contributor in this list gets a tax receipt

Contributor's name	Contributor's address	Tax receipt #	Amount
First Hir Kugaaruk.	N/A	NIA	N/A
		al Contributions—Named rite total on Line 1 Part A)	
The above is an accurate and complete reco		ve received for this candid	ate's campaign. It
contains no false or misleading information Financial Agent's signature:	Candidate's signa	ature:	
rinancial Agent 5 signature:	Candidate S signa	ature.	3

B-2: Financial Contributions—Anonymous & Gatherings



If the campaign had no financial contributions from anonymous or gatherings, write 'N/A' for the total and sign below.				
Write the gathering sponsor, address, and date OR 'Anonymous'	Amount			
	X			
Total Financial Contributions—Anonymous & Gatherings (Write total on Line 2 Part A)	Ø.			
The above is an accurate and complete record of all financial contributions from campaign greceived for this candidate's campaign. It contains no false or misleading information.	atherings and 'anonymous' that we			
Financial Agent's signature: Candidate's signature:	Jan.			

C-3: Goods & Services—Contributions & Expenses



If your campaign had no goods and services contributions and expenses, write 'N/A' in the totals and sign below.

	Record the market value in one or more expense categories					Total Market Value—	
Contributor's name and address	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Contribution
							Q
							4
							8
						11 =	Q
Totals	8	Ø	B	X	K	Q	Ø
	Write the	e total for ea	ch category	on the first	line in Part D	Expenses	Write total on Line 3 Part A

The above is an accurate and complete record of all financial contributions from campaign gatherings and 'anonymous' that we received for this candidate's campaign. It contains no false or misleading information.

Financial Agent's signature:

Candidate's signature:

C-4: Candidate's personal money (NOT reimbursed)—Contributions & Expenses



	Record the	total amou	nt in one or	more expe	ense categor	ies.	Total Amount— Contribution
Name on receipt Attach all receipts	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	
							&
							8
							Ó
							Q
Totals	P	Q	Ø	Q	Q	8	Q
	Write the to	otal for each	n category o	n the secon	nd line in Par	t D.	Write total contribution on Line 4 Part A

The above is an accurate and complete record of all financial contributions from campaign gatherings and 'anonymous' that we received for this candidate's campaign. It contains no false or misleading information.

Financial Agent's signature:

Candidate's signature:

D: Expenses



	#	Amount of	each expens	se		1			
Name of supplier Name on receipt or invoice Attach all receipts	Invoice or receipt#	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Cheque Number	Petty Cash Used ✓
Goods and Services Record numbers from C3	See C3				1	1			
Candidate's personal money Record numbers from C4	See C4		7	<					
				10					

D: Expenses



	#	Amount of	each expens	e		I				
Name of supplier Name on receipt or invoice Attach all receipts	Invoice or receipt #	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Cheque Number	Petty Cash Used ✓	
	Totals	Ø	Q	Q	Q	Q	Q			
		Write total on Line 6 Part A	Write total on Line 7 Part A	Write total on Line 8 Part A	Write total on Line 9 Part A	Write total on Line 10 Part A	Write total on Line 11 Part A			

The above is an accurate and complete record of the expenses of this candidate's campaign. It contains no false of misleading information.

Candidate's signature:

Financial Agent's signature:



eTicket Receipt

Prepared For QUQQIAQ/JOSEPH MR

RESERVATION CODE

ISSUE DATE

ISSUE DATE

ISSUING AIRLINE

ISSUING AGENT

TOUR CODE

22Jan16

FIRST AIR

First Air/SQN

Itinerary Details

TRAVEL DATE	AIRLINE	DEPARTURE	ARRIVAL	OTHER NOTES
24Jan	FIRST AIR 7F 852	TALOYOAK NU, CANADA Time 3:45pm	KUGAARUK NU, CANADA Time 4:21pm	Seat Number CHECK-IN REQUIRED Baggage Allowance 2PC
27Jan	FIRST AIR 7F 850	KUGAARUK NU, CANADA Time 2:15pm	TALOYOAK NU, CANADA Time 2:55pm	Seat Number CHECK-IN REQUIRED Baggage Allowance 2PC Fare Basis ZS160039 Not Valid Before 27JAN Not Valid After 24JAN

Allowances

Baggage Allowance

YYH to YBB - 2 Pieces FIRSTAIR, each piece up to 44 pounds/20 kilograms and over 62 linear inches/158 linear centimeters

YBB to YYH - 2 Pieces FIRSTAIR, each piece up to 44 pounds/20 kilograms and over 62 linear inches/158 linear centimeters

ADDITIONAL ALLOWANCES AND/OR DISCOUNTS MAY APPLY DEPENDING ON FLYER-SPECIFIC FACTORS /E.G. FREQUENT FLYER STATUS/MILITARY/ CREDIT CARDFORM OF PAYMENT/EARLY PURCHASE OVER INTERNET,ETC

Carry On Allowances

YYH to YBB, YBB to YYH - 2 Pieces (7F - FIRST AIR)

Payment/Fare Details

Form of F	Payment	CASH	
Endorser	ment / Restrictions	SPF 2016 0039	The second secon

, *	CAD0.00END
Fare	CAD 0.00
Total Fare	CAD 0.00

Notice:

Please keep a copy of this receipt for your records.

Important Legal Notices

24 JAN 2016 27 JAN 2016 TRIP TO KUGAARUK NU, CANADA

PREPARED FOR MR JOSEPH QUQQIAQ







DEPARTURE: SUNDAY 24 JAN Please verify flight times prior to departure

FIRST AIR 7F 0852

Duration: Ohr(s) 36min(s) YYH

TALOYOAK NU, CANADA

YBB KUGAARUK NU, CANADA

Departing At: 3:45pm

Terminal: Not Available Arriving At: 4:21pm

Terminal: Not Available Aircraft:

ATR TURBOPROP

Distance (in Miles): 117

Stop(s): 0

Passenger Name:

» Mr Joseph Quqqiaq

Seats:

Check-In Required



DEPARTURE: WEDNESDAY 27 JAN Please verify flight times prior to departure

FIRST AIR 7F 0850

Duration: Ohr(s) 40min(s) YBB

KUGAARUK NU, CANADA

▶ YYH

TALOYOAK NU, CANADA

ATR TURBOPROP Distance (in Miles): 117

Stop(s): 0

Aircraft:

Departing At: 2:15pm

Terminal: Not Available Arriving At: 2:55pm

Terminal: Not Available

Passenger Name:

» Mr Joseph Quqqiaq

Seats:

Check-In Required

Meals:

Snack