

# LONG FORM—Campaign Financial Return

#### To the financial agent:

- Complete this form if the campaign had ANY contributions or expenses. Do Part A last (Summary and Declaration).
- Deadline—60 days after Election Day. Send it to the CEO at Elections Nunavut, Rankin Inlet.
- For instructions, see the document 'How to fill out the financial return'.

Checklist: After you complete this form, sign your initials to the checklist below. Send this page with the other items to the CEO at Elections Nunavut, Rankin Inlet—BEFORE THE DEADLINE!

Items	FA	CA	EN	Auditor
All parts of the form filled in and signed.	≤0	AP	M	
Receipts for every expense, including unpaid	d expenses.		m	
Printed statement from the campaign account	nt. 50	AP	m	
☐ CEO approvals for any expenses over \$30,00	00.			
All tax receipts and Record of Tax Receipts for	orm. Se	AP	/	
If a surplus, a cheque or receipt.	50	AP	m	

## A: Summary of Contributions and Expenses



Sun	nmary of Contributions		
1.	Named contributions (see B1) CAP ENTERROISES LTD	\$ <u>300.00</u>	
2.	Anonymous contributions (see B2)		
3.	Goods and services contributions (see C3)	\$	
4.	Candidate's contributions, NOT reimbursed (see C4)	\$	
5.	Total contributions (Add lines 1 + 2 + 3 + 4)	\$_300.00	
Sur	nmary of Expenses (see D)		
6.	Ads & signs	\$	
7.	Salaries & allowances	\$	
8.	Office rent & utilities	\$	
9.	Travel	\$	
10.	Childcare & disability		
11.	Other	\$	Management of the control of the con
	Total expenses (Add 6 + 7 + 8 + 9 + 10 + 11)		
13.	Total Contributions (from line 5 above)	\$ <u>300.00</u>	
	Total Expenses (from line 12 above)		4
15.	Surplus or (Deficit): Contributions minus Expenses	\$ <u>285. 0</u> 0	
Su	rplus: Check ☑ one box below to show what you did with the surplus.	·	
129	Government of Nunavut. Attach the cheque or money order. Make it out to 'Consolid	ated Revenue Fund Nunavut'	
	Charitable organization (on list of eligible groups). Attach the receipt, made out to 'Ca		,

### A: Summary of Contributions and Expenses



Constituency:	Election Day:
Candidate's name & mailing address	Financial Agent's name & mailing address
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.	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 made an oath under the Nunavut Evidence Act.
At (community):	At (community):
Date (yyyy/mm/dd):	Date (yyyy/mm/dd):
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

### B-1: Financial Contributions—Named



Each contributor in this list gets a tax receipt

Contributor's name			Contributor's address	Tax receipt #	Amount
CAR	Enterprises	LD	RO. BOX US GJOB HAVEN, NU XOBISO		\$300.00
			<b>Total Financial Co</b> (Write	ontributions—Named total on Line 1 Part A)	CAR Enterprise

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

Financial Agent's signature:

### **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 **Total Financial Contributions—Anonymous & Gatherings** (Write total on Line 2 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-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 th	Record the market value in one or more expense categories					
Contributor's name and address	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Value— Contribution
	The state of the s						
Totals	<i>9</i>	8	÷	<b>⊕</b>	-5	-0	-0-
	Write the	total for eac	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:

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



	Record the	Total Amount- Contribution					
Name on receipt Attach all receipts	Ads & Signs	8		Travel	Childcare & Disability	Other	
Totals	0	0	0	-0	-	0	0
	Write the to	otal for each	ı category oı	n the secon	d line in Par	t D.	Write total contribution or 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:

# D: Expenses



		Amount of each expense							and the second s
Name of supplier Name on receipt or invoice Attach all receipts	Invoice or receipt#	Ads & Signs	Salaries ଝ allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Cheque Number	Petty Cash Used 🗸
Goods and Services Record numbers from C3	See C3								
Candidate's personal money Record numbers from C4	See C4								
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							ÖÖ-Ülvopathaqqqa—th uppa		
	The annual support of the support of								© Parket of Parket of the Control o



	*	Amount of each expense							
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	<b>&amp;</b>	6	-6-	-6	·G-	0	0	0
		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 or misleading information. Financial Agent's signature:

CHEQUE DATE

CHEQUE NUMBER

GOVERNMENT OF NUNAVUT

Oct 18, 2013

022245

\$285.00

DESCRIPTION

REF.

INVOICE AMOUNT

DISCOUNT

AMOUNT PAID

Andrew Porter Campaign Fund (Tx.#1361426

GOVERNMENT OF NUNAVUT Cash Exchange

Oct 18, 2013

Cheque Total

\$285.00

THE BANK OF NOVA SCOTIA SCOTIABANK BUSINESS SUPPORT CENTRE P.O. BOX 3700, STATION MAIN WINNIPEG, MB R3C 0A7

ACL 811-L

QIKIQTAQ CO-OPERATIVE ASSOCIATION LTD.

Please Detach Before Cashing

THIS CHEQUE CONTAINS A MICHOPHINT BORDER AND SECURITY FEATURES

QIKIQTAQ CO-OPERATIVE ASSOCIATION LTD.

P.O. Box 120, Gjoa Haven, NU X0B 1J0

THE BANK OF NOVA SCOTIA
SCOTIABANK BUSINESS SUPPORT CENTRE
P.O. BOX 3700, STATION MAIN WINNIPEG, MB R3C 0A7

022245

DATE

Oct 18, 2013,

Two Hundred Eighty Five Dollars

\$285.00

GOVERNMENT OF NUNAVUT

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QIKIQTAQ CO-OPERATIVE ASSOCIATION LTD.

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Qikiqtaq Co-operative Ltd. Box 120 Gioa Haven NU XOB 1J0 Phone 867-360-7271 Fax 867-360-6018 GST# 10279 1571 RT

Balance Slip

10/18/2013 10:37:45 A

Member: 3272430 ANDREW PORTER CAMPAIGN FUND

Credit Limit:

0.00

Current Balance:

0.00 0.00

Available Credit:

Store: 10 Station: 9

Cashier: 301

Qikiqtaq Co-operative Ltd. Box 120 Gjoa Haven NU XOB 1J0 Phone 867-360-7271 Fax 867-360-6018 GST# 10279 1571 RT

Balance Slip M

10/18/2013 10:34:20 A

Member: 3272430 ANDREW PORTER CAMPAIGN FUND

Credit Limit:

0.00

Current Ralance:

-300.00

Available Credit: 300.00

Store: 10 Station: 1

Cashier: 04

Qikiqtaq Co-operative Ltd. Box 120 Gjoa Haven NU XOB 1JO Phone 867-360-7271 Fax 867-360-6018 GST# 10279 1571 RT

Withdraw Tx#42703

2013-10-18 10:37:18 

> Member: 3272430 ANDREW PORTER CAMPAIGN FUND

ANDREW POLONGAYA: Simon Withdraw:

300.00

Subtotal

300.00

Total

300.00

Cash 300.00

Store: 10 Station: 9

Cashier: 301

Your cashier today was Keith

Thank You! Kuvanamiik!

Nutrition North Canada brought to you by AANDC and your community Co-op making nutritious food more affordable Subsidy 1 \$3.40 /KG Subsidy 2 \$1.60 /KG

Effective February 4,2013 for CASH sales only when pennies are not available price rounding will be applied to the total bill of sale after calculation of applicable taxes: Round down \$1.01 or \$1.02 to \$1.00 Round down \$1.06 or \$1.07 to \$1.05 Round up \$1.03 or \$1.04 to \$1.05 Round up \$1.08 or \$1.09 to \$1.10

Qikiqtaq Co-operative Ltd. Box 120 Gioa Haven NU XOB 1J0 Phone 867~360~7271 Fax 867-360-6018 GST# 10279 1571 RT

Tx#1361426 2013-10-18 10:35:38

Member: 1000 CASH EXCHANGE

CO-OP CHEQUE #: 22245 FIRST NAME: Government

LAST NAME: of Nunavut SENDER: Simon (Andrew)

30605

CASH EXCHANGE 285.00 15.00

30504 FEES, CASH TRANS

Item Count: 2

Subtotal Total Beverage Deposit

300.00 0.00

Total

300.00

Cash

300.00

Store: 10 Station: 9

Cashier: 301

Your cashier today was Keith

Thank You! Kuyanamiik!

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