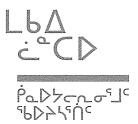


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በበቴታል፦ 20 ልቴታልና, ቃፊንና XOA 0H0 ኦቴታር: (867) 979-6603 ፖሪቲሪንስቴር: (867) 979-6493 www.mackaylandau.ca

# AUDITORS' REPORT ON THE CANDIDATE'S CAMPAIGN FINANCIAL RETURN PURSUANT TO THE NUNAVUT ELECTIONS ACT

To the Chief Electoral Officer

We have audited the candidate's Campaign Financial Return prepared in accordance with the accounting requirements of Part VII of the *Nunavut Elections Act* for the candidacy of Anthony Anguttitauruq, a candidate in the by-election of a member to serve in the Legislative Assembly of Nunavut held on the 26th day of April, 2010 in the constituency of Nattilik. This financial information is the responsibility of the financial agent for the candidate. Our responsibility is to express an opinion on this financial information based on our audit.

We conducted our audit in accordance with generally accepted auditing standards and the requirements of Section 181.1 of the *Nunavut Elections Act*. Generally accepted auditing standards require that we plan and perform an audit to obtain reasonable assurance whether the financial information is free of material misstatements. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial information. An audit includes assessing the accounting principles used and significant estimates made by the financial agent of the candidate, as well as evaluating the overall presentation of the financial information. The *Act* does not, however, require us to report, nor was it practicable for us to determine, that the accounting records include all transactions relating to the candidacy of Anthony Anguttitauruq. Due to the inherent nature of the transactions of electoral campaigns, the completeness of contributions and other revenue and expenses is not susceptible to satisfactory audit verification. Accordingly, our verification of these amounts was limited to the amounts recorded in the campaign's accounting records.

In our opinion, the Campaign Financial Return of Anthony Anguttitauruq presents fairly, in all material respects, the information contained in the financial records on which it is based in accordance with the accounting requirements of the *Nunavut Elections Act* and the accounting guidelines issued by Elections Nunavut.

Iqaluit, Nunavut July 25, 2010 CHARTEREĎ ACCOUNTANTS

Mackey London



Constituency: NATTILIK	Election Day: APRIL 26, 2010		
Candidate's name: ANTHONY ANGUITITAURUQ	Financial Agent's name:  KIMBERLY ANGUITITAURUQ		
Mailing Address: P.O. Box 121	Mailing Address: P.o. Box 312		
Community: GJOA HAVEN, NU Postal Code: XOB 1JO	Community: GJOA HAVEN, NU Postal Code: XOB IJO		
Summary of Contributions			
1. Named contributions	\$ 415.25		
2. Anonymous contributions (\$100.00	or less) \$ 0		
3. Goods and services	\$ 435.75		
4. Candidate's personal \$\$ used, NO	Treimbursed \$ 8		
5. Total contributions (Add lines 1	+ 2 + 3 + 4) \$ 851.00		
Summary of Expenses			
6. Ads & Signs			
7. Salaries & Allowances	\$		
8. Office rent & utilities	\$		
9. Travel	\$ 846.69		
10. Childcare & disability	\$ &		
11. Other	\$		
12. Total expenses (Add 6 + 7 + 8 + 9	+ 10 + 11) \$ 846.69		
Total Campaign Contributions (line 5)	\$ 851.00		
Total Campaign Expenses (line 12)	\$ 846.69		
Surplus or (Deficit): Contributions minus	Expenses $$4.31$		

White: CEO Yellow: Candidate Pink: Financial Agent 2 of 12



at you did with the surplus. Cheque or money order. Make it out to
:heque or money order. Make it out to
eceipt, made out to 'Campaign of'. unavut list of eligible groups.
ial Return and the Candidate will equires.
nancial Agent's Declaration
olemnly declare that I prepared this nancial return and that it is accurate d complete; it contains no false or isleading information.
leclare this knowing that it has the me force and effect as if I made an the Nunavut Evidence Act.
(community): GJOA HAVEN
te: June 10 2010
ancial Agent's signature:
in Anth
nature of Commissioner of Oaths,
MP: Acres Abramant



Part B: Financial	Contributions				
Contributor's name. Write 'Anonymous' or 'Gathering' where applicable.	Contributor's address. If 'Anonymous' or 'Gathering' write N/A.	Amount: Named contributor	Tax receipt number for named contributor	Amount: Anonymous or Gathering	Amount: Anonymous sent to CEO or returned
ANTHONY ANGUITTAURUQ	P.O.BOXIZI GODA HAVEN, NU	20000	1206	D.	Ø
MARCELINE ANGUTTI TAURUQ	P.O.BOX 121 GOOD HAVEN, NU	215.25	1207	Ø	Ø
				-	

White: CEO

Yellow: Candidate



Part B: Financial	Contributions				`
Contributor's name. Write 'Anonymous' or 'Gathering' where applicable.	Contributor's address. If 'Anonymous' or 'Gathering' write N/A.	Amount: Named contributor	Tax receipt number for named contributor	Amount: Anonymous or Gathering	Amount: Anonymous sent to CEO or returned
	Subtotals	\$ 415.25  Transfer to  Part A Line 1		\$ Control Transfer to Part A Line 2	\$ &
	urate and complete record of a		ributions we rec	reived for this ca	andidate's
Financial agent's sig	gnature	Candida	ate's signature	7	

White: CEO

Yellow: Candidate

Pink: Financial Agent

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Part B: Goods and Services / Goods	THE STATE OF THE S	nor lingues modify		***************************************			***
	5.6 5 4	Record	l the mark	et value i	n one or 1	nore categ	ories
Contributor's name and address	Market Value Total	Ads & Signs	Salaries & allowances	Office rent	Travel	Childcare & Disability	0
FIRST AIR 30 COPE DRIVE KANATA, ONT KAMAN	8 435.75				435.75		
			,				

White: CEO

Yellow: Candidate



		Record	d the mark	et value i	n one or 1	more cate	gories
Contributor's name and address	Market Value Total	Ads & Signs	Salaries å allowances	of fice the state of the state	Trave	Childcare &	Š.
					,		
				-		***************************************	
Total Goods and Services	\$435.75	\$	\$	\$	\$435.75	\$	\$
	Transfer to Part A Line 3  Transfer the total for each expense category to the filline, Part B: Campaign Expenses.				e first		
ne above is an accurate and complete rempaign. It contains no false or mislead			oods and s	ervices do	onated to t	his candid	ate's



Part B: Candidate's personal \$\$ used NOT reimbursed.

Part B: Candidate's personal \$\$ used NOT reimbursed. Attach all receipts to this page.

	T	l .				* 2	
		Record	l the total	amount in	n one or r	nore categ	ories.
Supplier's name. Attach all receipts.	Total Amount	Ads & Signs	Salaries &	Office rent	O Common	Childcare & Disability	0
		¢		-			

White: CEO

Yellow: Candidate



Part B: Candidate's personal \$\$ used NOT reimbursed. Part B: Candidate's personal \$\$ used NOT reimbursed. Attach all receipts to this page. Record the total amount in one or more categories. Signs Total 00 all Quances ్ర Supplier's name. Attach all receipts. Disability Salaries Other Amount 080 Ads Total Candidate's personal \$\$ \$ \$ \$ \$ \$ Transfer Transfer the total for each expense category to the to Part second line, Part B: Campaign Expenses. A Line 4 The above is an accurate and complete record of the candidate's personal money used for this campaign, and NOT reimbursed. It contains no false or misleading information. Financial agent's signature Candidate's signature

Part B: Campaign Financial Return



Part B: Campaign Expenses. Attach all receipts.

	<b>t</b>	Amount of each expense							
Name of Supplier	Invoice or Receipt Number	Ads & Signs	Salaries å allowances	Q 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Travel	Childcare & Disability	Other	Cheque Number	Petty Cash Used
Part B: Goods and Services	-				435,75				-
Part B: Candidate's personal \$\$	Attached							-	-
PETROLEUM PRODUCTS DIVISION	1491170				156.52				
PETROLEUM PRODUCTS DIVISION	1491171	Militar bir Market (Market barket and season and season as a quality in			13,99				
FIRST AIR	2452103091318				215:25				
QIKIGTAG CO-OPERATIVE LTO.	855142				25.18				
								***************************************	

White: CEO

Yellow: Candidate



	4-		Am	ount of e	ach expe	nse		que Number	\
Name of Supplier	Invoice or Receipt Number	Ads & Signs	Salaries & allowances	Office rent &	Tave	Childcare & Disability			Petty Cash Used
				•					
	Subtotals	\$	\$	\$	\$846.69	\$	\$		
		Transfer to Part A Line 6	Transfer to Part A Line 7	Transfer to Part A Line 8	Transfer to Part A Line 9	Transfer to Part A Line 10	Transfer to Part A Line 11		
The above is an accurate and coralse or misleading information.	•	of all cam	paign exp	enses, inc	cluding u	npaid exp	enses. It o	contains n	0
Kin Ant				A.C.	La ZA	X			

White: CEO

Yellow: Candidate

Pink: Financial Agent

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Part B: Record of sponsors of campaign gatherings						
Sponsor's Name: Use a different line for each sponsor and each gathering	Date of gathering: Year/ Month / Day	Location of gathering: e.g. xxx's house, xxx Hotel				
		·				
The above is an accurate and complete record of sponsors of fundraising gatherings for this candidate's campaign. It contains no false or misleading information.						
Financial agent's signature	Candidate's signature					

White: CEO

Yellow: Candidate



# Record of Tax Receipts

The financial agent completes and signs this form when they first get the tax receipts.

Constituency: NATTILIK	Candidate: ANTHONY ANGUTTATAURUE					
Serial Numbers of Tax Receipts						
From: 1206	To: 1210					
·						
the declaration of candidacy. I r	fficial candidate – Elections Nunavut accepted received the tax receipts listed above. I know I navut's laws, and account for them before the with the financial return.					
KNN Angthit Financial Agent's signature	Date: 10/05/20  Year / Month / Day					
The RO gives one copy to the fir	nancial agent and faxes one copy to the CEO.					
Chief Electoral Officer, Electi	ions Nunavut Toll-free fax: 1.800.269.1125					



### Account of Tax Receipts

The financial agent must complete and sign this form to report on all tax receipts.

Fill out this form after you complete the financial return - it has information you need to complete this form. Send this form and all tax receipt books to Elections Nunavut with the financial return.

Constituency:	Election Day:
Candidate's Name & Address  ANTHONY ANGUTTTALIRUG  P.O. BOX 121  GJOA HAVEN, NY  XOB 150	Financial Agent's Name & Address KIMBERLY ANGUITITAURUQ P.O. BOX312 GJOA HAVEN, NU XOB 150

Did the candidate have more than one financial agent during the campaign? If yes write down the name and address for each financial agent and the dates each one started and finished their work.

Financial Agent Name & Address	Start & Finish Dates	

Write down the serial numbers for each category of tax receipts. Check the 'Record of Tax Receipts' form and include all the serial numbers you received.

Serial Numbers	√ Issued	√ Unused	✓ Voided
1206	V		
1207	V		
1208			V
1209		V	
1210		V	

Total contributions based on adding up all the issued tax receipts:				
Total named contributions from the financial return:				
	7	1	7 1	

These numbers should be the same. If they're not the same go back and check over the financial return and this account of tax receipts.

I used the tax receipts according to Nunavut's laws and I swear that the information in this account of tax receipts is accurate and complete.			
Kin   Antiffer Financial Agent's signature	10/06/10 Date (yr/mo/day)		
Home phone #: (867) 360-7981	Work phone #:		

#### Named Contributions

Record each named contribution on the campaign financial return the same way you record all other named contributions, under Part B: Campaign Contributions.

Contributor's name and address	Amount of contribution
P.O.BOX 121 GJOA HAVEN, NY XOB 150	\$ 200.00
MARCELINE ANGUTTITAMENQ RO.BOX 121 GJOA HAVEN, NU XOB 1JO	\$ 215.25
	\$
	\$
	\$

Goods and Services Contributions			
Sponsor's name and address	Describe contribution	Market Value	
FIRST AIR			
ZO COPE DRIVE KANATA, ONT KZM ZV8	PASS	\$ 435,75	
		\$	
		\$	
Total contrib	\$ 435.75		
Record this amount on the campaign financial return the same way you record all other goods and services contributions, under Part B: Goods and Services		r	