



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
<input checked="" type="checkbox"/> All parts of the form filled in and signed.				
<input checked="" type="checkbox"/> Receipts for every expense, including unpaid expenses.				
<input type="checkbox"/> Printed statement from the campaign account.				
<input type="checkbox"/> CEO approvals for any expenses over \$30,000.				
<input type="checkbox"/> All tax receipts and Record of Tax Receipts form.				
<input type="checkbox"/> If a surplus, a cheque or receipt.				

A: Summary of Contributions and Expenses



Summary of Contributions

1. Named contributions (see B1)	\$	<u>N/A</u>
2. Anonymous contributions (see B2)	\$	<u>N/A</u>
3. Goods and services contributions (see C3)	\$	<u>N/A.</u>
4. Candidate's contributions, NOT reimbursed (see C4).....	\$	<u>1150.64</u>
5. Total contributions (Add lines 1 + 2 + 3 + 4).....	\$	<u>1150.64</u>

Summary of Expenses (see D)

6. Ads & signs	\$	<u>944.84</u>
7. Salaries & allowances	\$	<u>N/A</u>
8. Office rent & utilities	\$	<u>N/A</u>
9. Travel	\$	<u>205.80</u>
10. Childcare & disability	\$	<u>N/A</u>
11. Other	\$	<u>N/A</u>
12. Total expenses (Add 6 + 7 + 8 + 9 + 10 + 11)	\$	<u>1150.64</u>

13. Total Contributions (from line 5 above)	\$	<u>1150.64</u>
14. Total Expenses (from line 12 above)	\$	<u>1150.64</u>
15. Surplus or (Deficit): Contributions minus Expenses.....	\$	<u>0</u>

Surplus: 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 Revenue Fund Nunavut'
- Charitable organization (on list of eligible groups). Attach the receipt, made out to 'Campaign of _____'

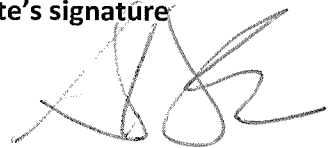




DEADLINE 60 days after Election Day
White copy to CEO

1
Yellow copy to Candidate

Send to CEO at Elections Nunavut, RANKIN INLET
Pink copy to Financial Agent

A: Summary of Contributions and Expenses



Constituency: <i>Rankin Inlet North - Chertefeld</i>	Election Day: <i>Oct. 28 / 13</i>
Candidate's name & mailing address <i>DILAK KUSUKAK</i> <i>P.O. BOX 825</i> <i>RANKIN INLET, NU X5C 0G0</i>	Financial Agent's name & mailing address <i>BRIAN SIGURDSON</i>
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 <i>Nunavut Evidence Act</i> . At (community): <i>Rankin Inlet, NU</i> Date (yyyy/mm/dd): <i>2013/12/06/11</i>	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 <i>Nunavut Evidence Act</i> . At (community): <i>Rankin Inlet</i> Date (yyyy/mm/dd): <i>DEC 19, 2013</i>
Candidate's signature 	Financial Agent's signature 
Signature: Commissioner of Oaths, JP, Notary Public, or RCMP  <i>SUSAN SWITCH (Barnes) Switch</i> <i>Commissioner of Oaths & Notary Public Nunavut</i>	Signature of Commissioner of Oaths, JP, Notary Public, or RCMP  <i>Jacqueline Curley</i> Justice of the Peace for Nunavut 

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 White copy to CEO

2
 Yellow copy to Candidate

Send to CEO at Elections Nunavut, RANKIN INLET
 Pink copy to Financial Agent

B-1: Financial Contributions—Named

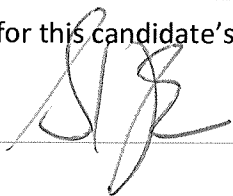


Each contributor in this list gets a tax receipt

Contributor's name	Contributor's address	Tax receipt #	Amount
Total Financial Contributions—Named (Write total on Line 1 Part A)			<i>N/A</i>

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: 

Candidate's signature: 

DEADLINE 60 days after Election Day
White copy to CEO

3
Yellow copy to Candidate

Send to CEO at Elections Nunavut, RANKIN INLET
Pink copy to Financial Agent

KENDRICK QUALITY PRINTING LTD

888 PORTAGE AVE, WINNIPEG, MANITOBA, R3G 0P4, CANADA

PHONE 204-943-7100 | FAX 204-943-7138

kendrick@kendrick.mb.ca | ftp.kendrick.mb.ca

Contact Qilak

KENDRICK QUALITY PRINT
888 PORTAGE AVE R3G0P4
WINNIPEG MB
21683344

Order Date Oct. 17/13

Postal Code _____ Completion Date _____

Phone _____ Fax _____

|||| PURCHASE ||||

10-17-2013 16:15:36
Acct #2605 M
Exp Date '//' Card Type MC
Name:

Trace # 130021
FS2166334401

Auth # 061195 CVD Resp Y
RRN 001401021

Total **5892.70**

Retain this copy for your records
Customer copy

ROOM 2 COLOUR PRESS 4 COLOUR PRESS BANNER P.O.# _____

black red 185 Process Colour
 cyan 355 green 341 PMS _____ PMS _____ PMS _____

cerlox
 score
around
left
 bundle _____

phone in person

QUANTITY	PAGES	SIDES	DESCRIPTION		
250	1	1	8 1/2 x 14. gloss text	197	50
750	1	2	8 1/2 x 11. gloss text	1065	50
Paid M/C Oct. 17/13					

PROOF <input type="checkbox"/> phone <input type="checkbox"/> fax <input type="checkbox"/> email	TOTAL \$ _____	Subtotal	796.00
<input type="checkbox"/> 1st proof date	DEPOSIT \$ _____	5% GST	39.50
<input type="checkbox"/> date due	BALANCE DUE \$ _____	8% PST	63.20
<input type="checkbox"/> pickup <input type="checkbox"/> deliver <input type="checkbox"/> call <input type="checkbox"/> courier	COD \$ _____	TOTAL	892.70
Stock ordered by: _____	50% deposit on non-account holders		
Date: _____	50265		

GST #12402 0538 RT0001

FIRST AIR CARGO WRT
GENERAL DELIVERY
RANKIN TRLETT. 100 200 000
867 645 3423

6550

245- 44076550

Merchant ID: 2800120000
Telex ID: 200

Sale

XXXXXXXXXXXX2605

MASTERCARD

Entry Method: CHIP

10/18/13

16:18:29

Inv #: 000004

Acqr Code: 076000

Apprvd

Batch#: 000115

Cust Ref #: 24544076500

Total: \$ 52.14

By printing & verifying PIN, cardholder
authorizes the use of such total in
accordance with the cardholder's agreement with
the issuer (MasterCard) and agreement if credit
cardholder (MasterCard) and agreement if credit
voucher).

Return this copy for statement
verification.

AID: A5000000041010
TVR: 00 00 00 00 00
TSI: E8 00

Card not Copy

Shipper's Account Number Numéro de compte de l'expéditeur WVGCASH		NOT NEGOTIABLE AIR WAYBILL (AIR CONSIGNMENT NOTE) NON NEGOCIABLE LETTRE DE TRANSPORT AERIEN		FIRST AIR ISSUED BY ÉMISE PAR The Airline of the North Reg. T.M. of Bradley Air Services Ltd. MEMBER OF A.T.A.C. MEMBRE DE L.A.T.A.C.	
Consignee's Account Number Numéro de compte du destinataire YRTCASH		Copies 1, 2, and 3 of this Air Waybill are originals and have the same validity Les exemplaires 1, 2, et 3 de cette lettre de transport aérien sont originaux et ont la même validité			
It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a higher value for carriage and paying a supplemental charge if required. Il est convenu que les marchandises décrites dans le présent document sont acceptées pour le transport en bon état apparent (sauf annotation contraire) et que le transport est SOUMIS AUX CONDITIONS DU CONTRAT QUI FIGURENT AU VERSO. L'ATTENTION DE L'EXPÉDITEUR EST ATTIRÉE SUR L'AVIS CONCERNANT LA LIMITATION DE RESPONSABILITÉ DU TRANSPORTÉUR. L'expéditeur peut augmenter cette limitation de responsabilité en déclarant une valeur pour le transport plus élevée et en payant des frais supplémentaires s'il y a lieu.		Accounting Information / Renseignements comptables COLLECT YRTCASH			
Account No. / Numéro de compte		Declared Value for Carriage Valeur déclarée pour le transport			
Declared Routing Itinéraire demandé		Declared Value for Customs Valeur déclarée pour la douane			
Destination dest.	to / à	by / par	to / à	by / par	Amount of Insurance Montant de l'assurance
Flight Date Vol. / Date		For Carrier Use Only Réservé au transporteur		INSURANCE - If Carrier offers insurance, and such insurance is requested in accordance with conditions on reverse hereof, indicate amount to be insured in figures in box marked 'Amount of Insurance'. ASSURANCE - Si le transporteur propose une assurance et que l'expéditeur en fait la demande conformément aux conditions figurant au verso indiquer le montant à assurer en chiffres dans la case 'Montant de l'assurance'.	

Pieces / Nombre de colis / PCZ	Gross Weight / Poids brut / kg	Rate Class / Classif. du tarif	Chargeable Weight / Poids de taxation	Rate / Charge / Tarif / Montant	Total	Nature and Quantity of Goods (inc. Dimensions or Volume) Nature et quantité des marchandises (y compris dimensions ou volume)
10					\$39.70	FEEL TONS MATERIAL
Prepaid / Port payé		Weight Charge / Taxation au poids		Collect / Port dû		Other Charges / Autres frais FSC-\$8.02 FUEL SURCHARGE NAV-\$2.54 NAV SURCHARGE GST-\$2.48
Valuation charge / Taxation à la valeur		Tax / Taxe		Total other Charges Due Agent / Total des autres frais dus à l'agent		
Total other Charges Due Carrier / Total des autres frais dus au transporteur		Total prepaid / Total port payé		Total collect / Total port dû		
Currency Conversion Rates / Taux conversion monnaie		CC Charges in Dest. Currency / Port dû en monnaie du pays de destination		Executed on / Fait le		
For Carrier's Use only at Destination / Réservé au transporteur à destination		Charges at Destination / Frais à l'arrivée		Total collect Charges / Total dû		

Signature of Shipper or his Agent / Signature de l'expéditeur ou de son agent

054 18 Oct 13 WVGF77 Tim Garrity

Signature of Issuing Carrier or its Agent / Signature du transporteur émetteur ou de son agent

245- 44076550

From: **Calm Air Reservations** mail@calmair.com
Subject: Calm Air ITINERARY QILAK KUSUGAK 893840
Date: October 22, 2013 at 10:01 AM
To: QILAK KUSUGAK qilakk@gmail.com

Calm Air Passenger Itinerary

Name: KUSUGAK, QILAK

Reservation #: 893840
Total Charges: 0.00
Total Taxes: 0.00
Total Amount: 0.00
Total Payments: 0.00
Balance: 0.00

ITINERARY

Date	Flight	From	To	Status
22 Oct 2013	541	12:00 - RANKIN INLET	12:15 - CHESTERFIELD INLET	CONFIRMED
24 Oct 2013	542	17:00 - CHESTERFIELD INLET	17:15 - RANKIN INLET	CONFIRMED

CHARGES

Description	Amount	Tax	Total
POSY - POSITIVE SPACE GUEST BO	0.00	0.00	0.00
POSY - POSITIVE SPACE GUEST BO	0.00	0.00	0.00
Total	0.00	0.00	0.00

CONTACT INFORMATION

Phone:
Email: qilakk@gmail.com

AGENCY INFORMATION

Agency: CALM AIR
IATA #:
Phone: 204-778-6471
Fax: 204-778-6954
Agent: Kim Acct

Calm Air International
90 Thompson Drive Thompson, Manitoba, Canada R8N 1Y8
Phone: (204) 778-6471
Fax: (204) 778-6954

GST Registration: 802527028RT0001

***** THIS ITINERARY IS YOUR OFFICIAL TRAVEL DOCUMENT/RECEIPT *****

- This is an automated message system. If you have any concerns about this message, or if you have received this message in error, please contact Calm Air at 1-800-839-2256.
- Please review this itinerary/receipt, and should you have any questions, please call us within 24 hours of receipt of this message. Call our toll-free Reservations line at 1-800-839-2256, or consult your local telephone directory.
- Aeroplan flight reward tickets on Calm Air are subject to Aeroplan terms and conditions. For any changes, cancellations, or refunds, please call the Aeroplan Contact Centre at 1-800-361-5373.

***** GENERAL FARE CONDITIONS *****

- All fares displayed on the website are subject to change until purchase and approval of the reservation has been received and completed by Calm Air

From: **Calm Air Reservations** mail@calmair.com
Subject: **Calm Air ITINERARY DENISE KUSUGAK 894280**
Date: **October 23, 2013 at 8:34 AM**
To: **DENISE KUSUGAK** qilakk@gmail.com

Calm Air Passenger Itinerary

Name: KUSUGAK, DENISE

Reservation #: 894280
Total Charges: 196.00
Total Taxes: 9.80
Total Amount: 205.80
Total Payments: 0.00
Balance: 205.80

ITINERARY

Date	Flight	From	To	Status
23 Oct 2013	541	12:00 - RANKIN INLET	12:15 - CHESTERFIELD INLET	CONFIRMED
24 Oct 2013	542	17:00 - CHESTERFIELD INLET	17:15 - RANKIN INLET	CONFIRMED

CHARGES

Description	Amount	Tax	Total
GRP80 - GROUP TRAVEL	67.00	3.35	70.35
NAV CANADA SURCHARGE	15.00	0.75	15.75
INSURANCE SURCHARGE	5.00	0.25	5.25
FUEL SURCHARGE	10.00	0.50	10.50
GRP80 - GROUP TRAVEL	69.00	3.45	72.45
NAV CANADA SURCHARGE	15.00	0.75	15.75
INSURANCE SURCHARGE	5.00	0.25	5.25
FUEL SURCHARGE	10.00	0.50	10.50
Total	196.00	9.80	205.80

CONTACT INFORMATION

Phone:
Email: qilakk@gmail.com

AGENCY INFORMATION

Agency: CALM AIR
IATA #:
Phone: 204-778-6471
Fax: 204-778-6954
Agent: Kim Acct

Calm Air International
90 Thompson Drive Thompson, Manitoba, Canada R8N 1Y8
Phone: (204) 778-6471
Fax: (204) 778-6954

GST Registration: 802527028RT0001

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