

### 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.	e-e-m	5 M	m	
Receipts for every expense, including unpaid expenses.	& An	SM	m	
Printed statement from the campaign account.	6 sm	SM	Dw	
☐ CEO approvals for any expenses over \$30,000.				
☐ All tax receipts and Record of Tax Receipts form.				
☐ If a surplus, a cheque or receipt.			/	

SM John

### A: Summary of Contributions and Expenses



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Sun	nmary of Contributions		1010 - SA	v
1.	Named contributions (see B1)	\$	817.950	
2.	Anonymous contributions (see B2)	\$		•
3.	Goods and services contributions (see C3)	\$	6	
4.	Candidate's contributions, NOT reimbursed (see C4)	\$	<u></u>	
5.	Total contributions (Add lines 1 + 2 + 3 + 4)	\$		
Sun	mmary of Expenses (see D)			
6.	Ads & signs	\$		
7.	Salaries & allowances	\$	<u> </u>	
8.	Office rent & utilities	\$		
9.	Travel	\$	81795	
10.	Childcare & disability		,	
11.	Other	\$		
12.	Total expenses (Add 6 + 7 + 8 + 9 + 10 + 11)	\$	81295	$\overline{}$
13.	Total Contributions (from line 5 above)	\$	2-683 JA55 5 M.	national
	Total Expenses (from line 12 above)			
15.	Surplus or (Deficit): Contributions minus Expenses	\$		
Su	ırplus: Check  one box below to show what you did with the surplus.	ki k		
	Government of Nunavut. Attach the cheque or money order. Make it out to 'Consolid	dated R	evenue Fund Nunavut'	
	Charitable organization (on list of eligible groups). Attach the receipt, made out to 'C	ampaig	n of	, -
distribution				***************************************

# **A:** Summary of Contributions and Expenses



Constituency: Awilik	Election Day: October 28, 2013
Candidate's name & mailing address  Steve Mapsakt P.O. Box 11  Repulse Bey N.U.  XOC 0 HO	Financial Agent's name & mailing address  ETIZABETH MAPSALAK  BOX 11  Repulse Bay Na  XUC OHO
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):	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):  Candidate's signature	Date (yyyy/mm/dd):  Financial Agent's signature  Cara and alak
Signature: Commissioner of Oaths, JP, Notary Public, or RCMP  Cst. K. E. JOHNSON 59115  Royal Canadian Mounted Police	Signature of Commissioner of Oaths, JP, Notary Public, or RCMP  Cst. K. E. JOHNSON 59115  Royal Canadian Mounted Police

### **B-1:** Financial Contributions—Named



Contributor's name	Contributor's address	Tax receipt #	Amount
atm Air Internat	-ional		Amount 817.95
	•		
	Total Fi	inancial Contributions—Named (Write total on Line 1 Part A)	\ /
The above is an accurate and compl contains no false or misleading info	lete record of all named financial contribut	ions we received for this candid	late's campaign. It
Financial Agent's signature:		s signature:	

# **B-2:** Financial Contributions—Anonymous & Gatherings



rite the gathering sponsor, address, and date OR 'Anonymous'	Amount
Total Financial Contributions—Anonymous & Gatherings	
(Write total on Line 2 Part A)	
he above is an accurate and complete record of all financial contributions from campaign g	atherings and 'anonymous' that we
eceived for this candidate's campaign. It contains no false or misleading information.	
inancial 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
						COLUMN TO THE REAL PROPERTY OF THE PROPERTY OF	
		>					
Totals				817,95			817.9
	Write the	total for ea	ch category	on the first li	ne 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 amount in one or more expense categories.						Total Amount— Contribution
Name on receipt Attach all receipts	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	
Totals	Write the total for each category on the second line in Part 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 expense							NOINAVONMI NIGUAL	
Invoice or receipt #	Ads & Signs	Salaries & sallowances	Office rent & utilities	Travel	Childcare & Disability	Other	Cheque Number	Petty Cash Used ✓
See C3				817.95				
See C4								
	11							
	See C3	See C3 ee Prooice or receipt #	ED about the second that the second that the second that the second tension and the second tension that the second tension tension that the second tension that the second tension tension that the second tension tension tension that the second tension ten	See C3 See	See C3  Salaries & Signs allowances  Utilities  Travel	Pes C3  Salaries & Signs  Ads & Signs  allowances  utilities  Utilities  Childcare & Disability	See C3 Salaries & Signs allowances allowances CHildcare & Disability Other	See C3 Salaries & Signs allowances allowances Childcare & Disability Other Cheque Number

### D: Expenses



	**	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				81795			die emperature de la constantina de la	
		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.

Candidate's signature:

Financial Agent's signature:

SM

# Naujat Co-operative Ltd

Box 70

Repulse Bay, NU Canada X0C 0H0

Phone: 867 462-9943 Fax: 867 462-4152

E-mail: Manager.Naujat@ArcticCo-op.com

S.MAPSALAK MAPSALAK GENERAL DELIVERY REPULSE BAY, NU Canada XOC 0H0

Customer	Statement

Date:

Oct 30, 2013

Page:

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Amount Remitted

	Reference #	Description				Total	Paid	Due
1	1463957	Invoice				\$268.35	\$0.00	\$268.35
	1464323	Invoice				\$121.86	\$0.00	\$121.86
1	1464387	Invoice				\$52.40	\$0.00	\$52.40
Oct 27, 2013	1464613	Invoice				\$47.68	\$0.00	\$47.68
Oct 21, 2013	1464613	this as ween Censon	PAID	should has a to person rems Our PERSONALLY KAUFMANN				
Current	30 day	s 60	days	90 days	120+ d	avs	Tota	al Due
\$490.29		- 00			1201 0	.u., 0		0.29
Ψ170.27							Ψザブ	0.47