

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.				
☐ Receipts for every expense, including unpaid expenses.				
Printed statement from the campaign account.	fa	DAU		,
☐ CEO approvals for any expenses over \$30,000.				
All tax receipts and Record of Tax Receipts form.	Ra	DAU		
☐ If a surplus, a cheque or receipt.				

A: Summary of Contributions and Expenses



Sum	mary of Contributions		- 08 Pa	
1.	Named contributions (see B1)	\$	5	_
2.	Mamed contributions (see B1)	\$		_
3.	Goods and services contributions (see C3)	\$		_
4.	Candidate's contributions, NOT reimbursed (see C4)	\$	<i>5,</i>	<u></u>
5.	Total contributions (Add lines 1 + 2 + 3 + 4)	\$	5,00	
Sun	nmary of Expenses (see D)			
6.	Ads & signs			_
7.	Salaries & allowances			1
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)	\$	5,80	
14.	Total Expenses (from line 12 above)	. \$	200	_
15.	Surplus or (Deficit): Contributions minus Expenses	\$	5.	
Su	irplus: 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 'Consolida	ated Rev	enue Fund Nunavut	
	Charitable organization (on list of eligible groups). Attach the receipt, made out to 'Car	mpaign (of	

A: Summary of Contributions and Expenses



Constituency: Agg U	Election Day: 2013/10/28
Candidate's name & mailing address	Financial Agent's name & mailing address Philip Avingal
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):	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):	Date (yyyy/mm/dd):
Candidate's signature (Janual) Ugacal	Financial Agent's signature
Signature: Commissioner of Oaths, JP, Notary Public, or RCMP	Signature of Commissioner of Oaths, JP, Notary Public, or RCMP
William A. Qamuka	Well all

B-1: Financial Contributions—Named



Each contributor in this list gets a tax receipt

Contributor's name	Contributor's address	Tax receipt #	Amount
Daniel Vyarak		0436	5.00
	Total I	inancial Contributions—Nam (Write total on Line 1 Part	
The above is an accurate and complete contains no false or misleading informations in the contains and the contains in the contains are contained in the contains and complete contains are contained in the contains are contained in the contains are contained in the contained in	ation // . ///	itions we received for this can	didate's campaign. It

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 greceived for this candidate's campaign. It contains no false or misleading information. Financial Agent's signature: Candidate's signature:	catherings and 'anonymous' that we					

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	Total Market Value—					
Contributor's name and address	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Contribution
Totals	MA	NIX	N/A	NIA	NIA	NIA	ANA.
·	Write the	total for eac	ch category	on the first	line in Part D		Write total on Line 3 Part A

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



	Record the	Total Amount— Contribution					
Name on receipt Attach all receipts	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	
Daniel Vyarak						X	5.00
Totals							5. 20
	Write the t	otal for each	n category or	1 the secor	nd line in Par	t D.	Write total contribution on Line 4 Part A
The above is an accurate and complete re received for this candidate's campaign. It Financial Agent's signature:	cord of all fir	alse or misle	ributions from eading inform Candidate's	mation.	n gatherings	and 'anon'	ymous' that we

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 🗸
Goods and Services Record numbers from C3	See C3	WA	MA	NA	NA	AB	WA		
Candidate's personal money Record numbers from C4	See C4	NA	NA	AH.	1	DA.	DATA	The second secon	
	-								

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	NGA	NA	NA	NOA	DHA.	PA		
		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	omplete record of	f the expenses of th	is candidate's campaign.	It contains no	false or misleading informatio
THE above is an about are any	1) (1	' '/h .		<i>// /</i>	no / lanell

Candidate's signature: Namel ((yard(

Financial Agent's signature:



NUNAYUT ELECTIONS ACT
Receipt for a contribution to a candidate at an election of a member to serve in the Legislative Assembly of Nunavut.

Date Contribution Received Pay Month Year	Full Name of Contributor Daniel Uyarak Mailing Address	A Secretary of the second
Date Receipt Issued Day Month Year Pay Month Year 1 3	Name of Financial Agent Philip Avingag CONSTITUENCY	Name of Candidate Danie Uyara K ELECTION DAY Day Month Year
Sum of Five 2nd COPY - CHIEF ELECTOR	SIGNATURE OF FINANCIAL AGENT	LECTION DAY 2 18 Month Year 13

No. 0436

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					0



Record of Tax Receipts

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

Constituency: Aggu	Candidate: Daniellygrak
	And the second s
Serial numbers of tax receipts the financial ag	gent receives
From:	То:
0436	. 0440
0441	0445
	•
I am the financial agent for the candidate na above and used them according to Nunavureturn all used tax receipts (CEO copy) and Financial agent's signature:	amed above. I received the tax receipts listed I's laws. I attach to the campaign financial unused tax receipts.
Date (yyyy/mm/dd): 2003/10/18	

Original: CEO Copy: Candidate Copy: Financial Agent



Set up Campaign Account

The financial agent MUST complete this form as soon as they set up the account.
Sign the form and fax it to the CEO right away. Toll free fax: 800.269.1125
Constituency:
Candidate: Daniel Uyarak
l .
Declaration: I (financial agent name) Philip Avingag for
(candidate name) Daniel Uxarak opened an account at
(name of bank or other place that has the account) Northern Store
Account name: Campaign Account For Daniel Uyarg &
Account number:
I am the only person with signing authority for the account.
Financial Agent's signature:
Date (year / month / day): 20/3/07/27



The North West Company LP 77 Main Street Winnipeg, MB R3C 2R1





Date Account Number No de compte

New Balance Nouveau Solde \$5.00-

6/1

Scheduled Payment Paiement \$0.00

Past Due Solde Reporté \$0.00 Total Due Total dû \$0.00 Payment Amount Montant payé

M0113L NWREG

1334

001334

CAMPAIGN ACCOUNT DANIEL UYARAK

PO BOX 04

IGLOOLIK NU XOA OLO

Please make your payment at your local Northern/Northmart store. Veuillez effectuer votre versement à votre magasin Northern/NorthMart local

Make cheques payable to: Chèques à l'ordre de : THE NORTH WEST COMPANY LP

77 MAIN STREET

WINNIPEG MB R3C 2R1

Please return this portion with your named

Please Detach Here / detacher ici s.v.p.

Retourner cette partie avec votre paiement.

Print address changes on reverse

CUSTOMER SERVICE SERVICE À LA CLIENTÈLE

1-866-963-2477

0101X0A -91

Statement Details / Détails du relevé

Account

Juli-	ACCOUNT			
Date / de la transaction	Store Magasin	SKU Description Désignation	Debits / Débits	Credits / Crédits
		APA PREVIOUS BALANCE		\$0.00
09-30	IGLOOLIK	PAYMENT - THANK YOU #340391912 SCHEDULED PAYMENT = 0		\$5.00
		SCHEDULED PAYMENT = 0 NEW BALANCE PAY PLAN 01		\$5.00
			·	
		News & Notes / Notes & nouvelles		

We Financial Making it easy. Financial Services to meet your needs, where you need them.

Credit Plan Information / Information du plan de crédit

Credit Center Information Scheduled Payment Past Due Total Due Payment Due Date Credit Limit . Credit Available Information du plan de crédit Paiement Solde Reporté Total dû Payer Pour le Marge de credit Crédit disponible THE NORTH WEST COMPANY LP (MM/DD/YY) 1-866-963-2477 77 MAIN STREET \$0.00 \$0.00 \$0.00 11/10/13 WINNIPEG MB R3C 2R1

ccou					

Previous Balance Solde antérieur \$ 0 . 0 0 Payments Credits Crédits de paiement \$5.00

Finance Charge Frais financiers \$0.00

Charges Debits Frais débités \$0.00 Insurance Assurance \$0.00 New Balance Nouveau Solde \$5.00-