

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!

lte	ms	FA	CA	EN	Auditor
P	All parts of the form filled in and signed.		39	m	
ψ.	Receipts for every expense, including unpaid expenses.		961	m	
	Printed statement from the campaign account.		NA		
	CEO approvals for any expenses over \$30,000.		N/A		
	All tax receipts and Record of Tax Receipts form.		NA		
	If a surplus, a cheque or receipt.		N/A	And the state of t	

A: Summary of Contributions and Expenses



Sun	nmary of Contributions	
1.	Named contributions (see B1)	\$
2.	Anonymous contributions (see B2)	\$
3.	Goods and services contributions (see C3)	\$
4.	Candidate's contributions, NOT reimbursed (see C4)	s <u>443.63</u>
5.	Total contributions (Add lines 1 + 2 + 3 + 4)	
Sun	nmary of Expenses (see D)	
6.	Ads & signs	<u>443.63</u>
7.	Salaries & allowances	\$
8.	Office rent & utilities	\$
9.	Travel	\$
10.	Childcare & disability	\$
11.	Other	\$
12.	Total expenses (Add 6 + 7 + 8 + 9 + 10 + 11)	<u>\$ 443.63</u>
13.	Total Contributions (from line 5 above)	\$ 443.63
	Total Expenses (from line 12 above)	
	Surplus or (Deficit): Contributions minus Expenses	7.1
Su	rplus: Check ☑ one box below to show what you did with the surplus.	
	Government of Nunavut. Attach the cheque or money order. Make it o	ut to 'Consolidated Revenue Fund Nunavut'
	Charitable organization (on list of eligible groups). Attach the receipt, m	nade out to 'Campaign of'

A: Summary of Contributions and Expenses



Constituency: Rankin Injet North Chesterfield	Election Day: QCX 28/13
Candidate's name & mailing address	Financial Agent's name & mailing address
Donna adams 2-11 Pisugrik St. P.O. Box 417 Rankin Inlet, NU XOCOGO	Ted Lachance 220 Imagsag st P.O box 707 Rankin Inlet NU. xocogo
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): Rankin het Date (yyyy/mm/dd): 2013/12/13	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): Rankin Interpretation of the property of the p
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
holmer exp: Apr S/16	John exp: Apr5/16

B-1: Financial Contributions—Named



Each contributor in this list gets a tax receipt

Contributor's name	Contributor's address	Tax receipt #	Amount
Donna adams	POBOX 417, Rankin In let		443.637
			4104
		Contributions—Name	

Financial Agent's signature:

contains no false or misleading information.

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	NIA				
Total Financial Contributions—Anonymous & Gatherings (Write total on Line 2 Part A)	A / 1 / 1					
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:	atherings and 'an	onymous' 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 market value in one or more expense categories						Total Market Value—	
Contributor's name and address	Ads & Signs	Salaries & allowances	Office rent & utilities	Travel	Childcare & Disability	Other	Contribution	
Donna adams	413.63	E S						
Totals	中3.63 Write the	total for ea	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:

\mathbb{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	
Donna adams	443.63						
Totals	443.63						443.63
	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:

D: Expenses



	Amount of	Amount of each expense							
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	中3-63	XB						
Candidate's personal money Record numbers from C4	See C4	443.63							
			·					and the second s	
					Man Holde Advisor Committee Committe				

D: Expenses



	#	Amount of	each expens	e					
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 ✓
Kopykat North	23145	443.63							
	Totals	443,63							
		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.

Kopykat North

Box 146 Yellowknife NT X1A 2N1

Date	Sale No.
10/10/2013	23145

Sales Receipt

I CHO ASIMILIO IA I WIN TO	IUI
Ph. 867-920-2408 F. 86	67-920-7548
info@kopykatnorth.com	www.kopykatnorth.com

Sold To	
Donna Adams	

Cheque No.	Payment Method	Project	

Description	Quantity	Rate	Amount
Colour Posters Colour Brochures	50 300	1.55 1.15	77.50 345.00
Re: Election Materials GST on sales		5.00%	21.13
KOPYKAT NORTH BOX 146 YELLOHKNIFE, NT. X1A2N1 8679202408 Visa NID: 17691300016 Term ID: 002 Ref W	l: 906		
XXXXXXXXXXXXXX7131 VISA Entry Method: M	fanua l		
19/19/13 19: Inv W: 000006 Appr Code: 0 Apprvd BatchW: 0			
Total: \$	443.63		
Customer Copy		Total	\$443.63