

NOV 03 2022

**Instructions:**

All candidates must complete Boxes A and B. Candidates who receive contributions or incur expenses beyond the nomination fee must complete Boxes C, D, Schedule 1, and Schedule 2 as appropriate. Candidates who receive contributions or incur expenses in excess of \$10,000 must also attach an Auditor's Report.

All surplus funds (after any refund to the candidate or his or her spouse) shall be paid immediately over to the clerk who was responsible for the conduct of the election.

For the campaign period from (day candidate filed nomination) 

YYYY	MM	DD
2022	05	18

 to 

YYYY	MM	DD
2022	10	24

Primary filing reflecting finances to December 31 (or 45<sup>th</sup> day after voting day in a by-election)

Supplementary filing including finances after December 31 (or 45<sup>th</sup> day after voting day in a by-election)

**Box A: Name of Candidate and Office**

Candidate's name as shown on the ballot

Last Name

Graham

Given Name(s)

Kyle

Name of office for which the candidate sought election

Trustee - Protestant Separate School Board

Ward name or no. (if any)

Name of Municipality

Penetanguishene

Spending limit issued by clerk

\$

I did not accept any contributions or incur any expenses other than the nomination fee. (Complete Box A and B only)

**Box B: Declaration**

I, Kyle Graham, a candidate in the municipality of Penetanguishene, hereby declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct.

Declared before (clerk or commissioner)

in the

Penetanguishene

on (yyyy/mm/dd)

2022/11/23

Signature of Clerk or Commissioner

Date Filed in the Clerk's Office (yyyy/mm/dd)

Signature of Candidate

**Box D: Calculation of Surplus or Deficit**

Excess (deficiency) of income over expenses (Income – Total Expenses) (C1 – C4)	+ \$ _____	<b>D1</b>
Eligible deficit carried forward by the candidate from the last election	– \$ _____	<b>D2</b>
<b>Total (D1 – D2)</b>	<b>= \$ _____</b>	
If there is a surplus, deduct any refund of candidate's or spouse's contributions to the campaign	– \$ _____	
Surplus (or deficit) for the campaign	<b>= \$ _____</b>	<b>D3</b>

If line D3 shows a surplus, the amount must be paid in trust, at the time the financial statements are filed, to the municipal clerk who was responsible for the conduct of the election.

Amount of \$ \_\_\_\_\_ paid to municipal clerk in the municipality of \_\_\_\_\_.

Name	Full Address	Amount \$
<input type="checkbox"/> Additional information is listed on separate supplementary attachment		<b>Total</b>

**Table 2: Monetary contributions from corporations or unions**

Name (Legal and Carrying on Business As)	Full Address	President or Business Manager	Authorized Representative	Amount \$
<input type="checkbox"/> Additional information is listed on separate supplementary attachment				<b>Total</b>

**Table 3: Contributions in goods or services from individuals other than candidate or spouse**  
 (Note: must also be recorded as expenses in Box C)

Name	Full Address	Description of Goods or Services	Value \$



**Schedule 2 – Fundraising Events and Activities**

**Fundraising Event/Activity**

Complete a separate schedule for each event or activity held

Additional schedule(s) attached

Description of fundraising event/activity \_\_\_\_\_

Date of event/activity (yyyy/mm/dd) \_\_\_\_\_

**Part I – Ticket Revenue**

Admission charge (per person)

(If there are a range of ticket prices, attach complete breakdown of all ticket sales)

Number of tickets sold

**Total Ticket Revenue (2A X 2B) (Include in Schedule 1)**

+ \$ \_\_\_\_\_ **2A**

X \_\_\_\_\_ **2B**

= \$ \_\_\_\_\_

**Part II – Other revenue deemed a contribution**

(provide details (e.g. revenue from goods sold in excess of fair market value))

1. \_\_\_\_\_ + \$ \_\_\_\_\_

2. \_\_\_\_\_ + \$ \_\_\_\_\_

3. \_\_\_\_\_ + \$ \_\_\_\_\_

4. \_\_\_\_\_ + \$ \_\_\_\_\_

5. \_\_\_\_\_ + \$ \_\_\_\_\_

**Total Part II Revenue (include in Schedule 1)**

= \$ \_\_\_\_\_

**Part III – Other revenue not deemed a contribution**

(provide details (e.g. contributions of \$10 or less; market value of goods or services sold))

1. \_\_\_\_\_ + \$ \_\_\_\_\_

2. \_\_\_\_\_ + \$ \_\_\_\_\_

3. \_\_\_\_\_ + \$ \_\_\_\_\_

4. \_\_\_\_\_ + \$ \_\_\_\_\_

5. \_\_\_\_\_ + \$ \_\_\_\_\_

**Total Part III Revenue (include in Box C)**

= \$ \_\_\_\_\_

**Part IV – Expenses related to fundraising event or activity (provide details)**

1. \_\_\_\_\_ + \$ \_\_\_\_\_

2. \_\_\_\_\_ + \$ \_\_\_\_\_

3. \_\_\_\_\_ + \$ \_\_\_\_\_

4. \_\_\_\_\_ + \$ \_\_\_\_\_

5. \_\_\_\_\_ + \$ \_\_\_\_\_

6. \_\_\_\_\_ + \$ \_\_\_\_\_

7. \_\_\_\_\_ + \$ \_\_\_\_\_

8. \_\_\_\_\_ + \$ \_\_\_\_\_

**Total Part IV Expenses (include in Box C)**

= \$ \_\_\_\_\_