

**Instructions**

All candidates must complete Boxes A and B. Candidates who receive contributions or incur expenses 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 their spouse) shall be immediately paid to the clerk who is responsible for the conduct of the election.

For the campaign period from (day clerk received nomination) 

YYYY	MM	DD
2022	5	02

 to 

YYYY	MM	DD

- Initial filing reflecting finances from start of campaign to December 31 (or 45 days after voting day in a by-election)
- Supplementary filing reflecting finances from start of campaign to end of extended campaign period

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

Candidate's name as shown on the ballot

Last Name or Single Name <b>ROBERTS</b>	Given Name(s) <b>PATRICK FRANCIS</b>
Office for Which the Candidate Sought Election <b>MAYOR</b>	Ward Name or Number (if any)
Municipality <b>SMOOTH ROCK FALLS</b>	
Spending Limit General \$	Parties and Other Expressions of Appreciation \$
	Contribution Limit Contributions from Candidate and Spouse \$

I did not accept any contributions or incur any expenses. (Complete Boxes A and B only)

**Box B: Declaration**

I, **PATRICK FRANCIS ROBERTS** declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct.

\_\_\_\_\_  
 Signature of Candidate

\_\_\_\_\_  
 Date (YYYY/mm/dd)

Date Filed (YYYY/mm/dd) <b>2022/12/12</b>	Time Filed <b>PM.</b>	Initial of Candidate or Agent (if filed in person) <b>P.F.R</b>	Signature of Clerk or Designate 
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2. \_\_\_\_\_ + \$  
 3. \_\_\_\_\_ + \$  
 4. \_\_\_\_\_ + \$  
 5. \_\_\_\_\_ + \$

**Total Expenses subject to spending limit for parties and other expressions of appreciation** = \$ \_\_\_\_\_ C3

**3. Expenses not subject to spending limits**

Accounting and audit + \$  
 Cost of fundraising events/activities (list details in Part IV of Schedule 2) + \$ 350.00  
 Office expenses incurred after voting day + \$ \_\_\_\_\_  
 Phone and/or internet expenses incurred after voting day + \$ \_\_\_\_\_  
 Salaries, benefits, honoraria, professional fees incurred after voting day + \$ \_\_\_\_\_  
 Bank charges incurred after voting day + \$ \_\_\_\_\_  
 Interest charged on loan after voting day + \$ \_\_\_\_\_  
 Expenses related to recount + \$ \_\_\_\_\_  
 Expenses related to controverted election + \$ \_\_\_\_\_  
 Expenses related to compliance audit + \$ \_\_\_\_\_  
 Expenses related to candidate's disability (provide full details)  
 1. \_\_\_\_\_ + \$ \_\_\_\_\_  
 2. \_\_\_\_\_ + \$ \_\_\_\_\_  
 3. \_\_\_\_\_ + \$ \_\_\_\_\_  
 4. \_\_\_\_\_ + \$ \_\_\_\_\_  
 5. \_\_\_\_\_ + \$ \_\_\_\_\_  
 Other (provide full details)  
 1. \_\_\_\_\_ + \$ \_\_\_\_\_  
 2. \_\_\_\_\_ + \$ \_\_\_\_\_  
 3. \_\_\_\_\_ + \$ \_\_\_\_\_  
 4. \_\_\_\_\_ + \$ \_\_\_\_\_  
 5. \_\_\_\_\_ + \$ \_\_\_\_\_  
**Total Expenses not subject to spending limits** = \$ 350.00 C4

**Total Campaign Expenses (C2 + C3 + C4)** = \$ 622.33 C5

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

Excess (deficiency) of income over expenses + \$ \_\_\_\_\_ D1  
 (Income minus Total Expenses) (C1 – C5)

If there is a surplus, deduct any refund of candidate's or spouse's contributions to the campaign - \$ 622.33  
 Surplus (or deficit) for the campaign = \$ 622.33 D2

If line D2 shows a surplus, the amount must be paid in trust, at the time the financial statements are filed, to the municipal clerk who is responsible for the conduct of the election.

**Table 3: Monetary contributions from individuals other than candidate or spouse**

Name	Full Address	Date Received (yyyy/mm/dd)	Amount Received (\$)	Amount Returned to Contributor or Paid to Clerk (\$)
<b>Total</b>				

Additional information is listed on separate supplementary attachment, if completed manually.

**Table 4: 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	Date Received (yyyy/mm/dd)	Value (\$)
<b>Total</b>				

Additional information is listed on separate supplementary attachment, if completed manually.

**Total for Part III – Contributions exceeding \$100 per contributor** (Add totals from Table 3 and Table 4 and record the total in Part 1 – Summary of Contributions) \$ \_\_\_\_\_ 1B

**Schedule 2 – Fundraising Events and Activities**

Complete a separate schedule for each event or activity held.

Additional schedule(s) attached, if completed manually.

**Fundraising Event/Activity 1**

Description of fundraising event/activity

*FREE BOWLING EVENT*

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

*2022/05/14*

**Part I – Ticket revenue**

Admission charge (per person)

\$ \_\_\_\_\_ 2A

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

Number of tickets sold

x \_\_\_\_\_ 2B

**Total Part I (2A X 2B) (include in Part I of Schedule 1)**

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

**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 (include in Part I of Schedule 1)**

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

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

Provide details (e.g., contribution of \$25 or less; goods or services sold for \$25 or less)

- 1. \_\_\_\_\_ + \$ \_\_\_\_\_
- 2. \_\_\_\_\_ + \$ \_\_\_\_\_
- 3. \_\_\_\_\_ + \$ \_\_\_\_\_
- 4. \_\_\_\_\_ + \$ \_\_\_\_\_
- 5. \_\_\_\_\_ + \$ \_\_\_\_\_

**Total Part III (include under Income in Box C)**

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

**Part IV – Expenses related to fundraising event or activity**

Provide details

- 1. *FREE BOWLING-SRF 1-3PM* + \$ *150.00*
- 2. \_\_\_\_\_ + \$ \_\_\_\_\_
- 3. \_\_\_\_\_ + \$ \_\_\_\_\_
- 4. \_\_\_\_\_ + \$ \_\_\_\_\_
- 5. \_\_\_\_\_ + \$ \_\_\_\_\_

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

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

**Schedule 2 – Fundraising Events and Activities**

Complete a separate schedule for each event or activity held.  Additional schedule(s) attached, if completed manually.

**Fundraising Event/Activity 1**

Description of fundraising event/activity HALLOWEEN DANCE - DONATION

Date of event/activity (yyyy/mm/dd) 2022/10/29

**Part I – Ticket revenue**

Admission charge (per person) \$ \_\_\_\_\_ 2A

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

Number of tickets sold \_\_\_\_\_ x \_\_\_\_\_ 2B

**Total Part I (2A X 2B) (include in Part I of Schedule 1)** = \$ \_\_\_\_\_

**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 (include in Part I of Schedule 1)** = \$ \_\_\_\_\_

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

Provide details (e.g., contribution of \$25 or less; goods or services sold for \$25 or less)

- 1. \_\_\_\_\_ + \$ \_\_\_\_\_
- 2. \_\_\_\_\_ + \$ \_\_\_\_\_
- 3. \_\_\_\_\_ + \$ \_\_\_\_\_
- 4. \_\_\_\_\_ + \$ \_\_\_\_\_
- 5. \_\_\_\_\_ + \$ \_\_\_\_\_

**Total Part III (include under Income in Box C)** = \$ \_\_\_\_\_

**Part IV – Expenses related to fundraising event or activity**

Provide details

- 1. HALLOWEEN DANCE - DONATION + \$ 200.00
- 2. \_\_\_\_\_ + \$ \_\_\_\_\_
- 3. \_\_\_\_\_ + \$ \_\_\_\_\_
- 4. \_\_\_\_\_ + \$ \_\_\_\_\_
- 5. \_\_\_\_\_ + \$ \_\_\_\_\_

**Total Part IV Expenses (include under Expenses in Box C)** = \$ \_\_\_\_\_

**Auditor's Report – Municipal Elections Act, 1996 (Section 88.25)**

A candidate who has received contributions or incurred expenses in excess of \$10,000 must attach an auditor's report.  
Professional Designation of Auditor

Municipality

Date (yyyy/mm/dd)

**Contact Information**

Last Name or Single Name

Given Name(s)

Licence Number

Address

Suite/Unit Number

Street Number

Street Name

Municipality

Province

Postal Code

Telephone Number

Email Address

The report must be done in accordance with generally accepted auditing standards and must:

- set out the scope of the examination
  - provide an opinion as to the completeness and accuracy of the financial statement and whether it is free of material misstatement
- Report is attached

Personal information, if any, collected on this form is obtained under the authority of sections 88.25 and 95 of the *Municipal Elections Act, 1996*. Under section 88 of the *Municipal Elections Act, 1996* (and despite anything in the *Municipal Freedom of Information and Protection of Privacy Act*) documents and materials filed with or prepared by the clerk or any other election official under the *Municipal Elections Act, 1996* are public records and, until their destruction, may be inspected by any person at the clerk's office at a time when the office is open. Campaign financial statements shall also be made available by the clerk in an electronic format free of charge upon request.