

**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
2014	09	08

 to 

YYYY	MM	DD
2014	10	27

- 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

**GRAY**

Given Name(s)

**JOHANNE R.**

Name of office for which the candidate sought election

**TRUSTEE - CONSEIL SCOLAIRE VIANONDE**

Ward name or no. (if any)

**H.1A.**

Name of Municipality

**CITY OF LONDON**

Spending limit issued by clerk

\$ **7,311.15**

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

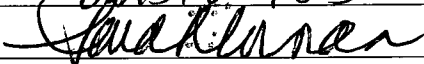
**Box B: Declaration**

I, **JOHANNE R. GRAY**, a candidate in the municipality of **CITY OF LONDON**, 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)

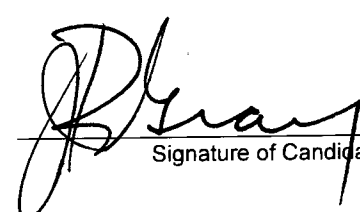
in the **City of London**

on (yyyy/mm/dd) **2015/08/23**

  
Signature of Clerk or Commissioner

**2015/08/23**  
Date Filed in the Clerk's Office (yyyy/mm/dd)

**SARAH CORMAN**, a Commissioner for taking Affidavits and Oaths, Middlesex County, while a deputized Clerk of The Corporation of the City of London.

  
Signature of Candidate

**Box C: Statement of Campaign Income and Expenses**

**LOAN**

Name of bank or recognized lending institution \_\_\_\_\_

Amount borrowed \$ Nil (0)

**INCOME**

Total amount of all contributions (From line 1A in Schedule 1)

+ \$ -

Refund of nomination filing fee

+ \$ 100.00

Sign deposit refund

+ \$ \_\_\_\_\_

Revenue from fund-raising events not deemed a contribution (From Part III of Schedule 2)

+ \$ Nil

Interest earned by campaign bank account

+ \$ Nil

Other (provide full details)

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

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

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

**Total Campaign Income (Do not include loan)**

= \$ 0 C1

**EXPENSES** (Note: include the value of contributions of goods and services)

**Expenses subject to spending limit**

Nomination filing fee

+ \$ 100.00

Inventory from previous campaign used in this campaign (list details in Table 5 of Schedule 1)

+ \$ - Nil

Advertising

+ \$ - Nil

Brochures/flyers

+ \$ - Nil

Signs (including sign deposit)

+ \$ - Nil

Meetings hosted

+ \$ - Nil

Office expenses incurred until voting day

+ \$ - Nil

Phone and/or Internet expenses incurred until voting day

+ \$ - Nil

Salaries, benefits, honoraria, professional fees incurred until voting day

+ \$ - Nil

Bank charges incurred until voting day

+ \$ - Nil

Interest charged on loan until voting day

+ \$ - Nil

Other (provide full details)

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

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

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

**Total Expenses subject to spending limit**

= \$ \_\_\_\_\_ C2

**Expenses not subject to spending limit**

Accounting and audit

+ \$ Nil

Cost of fund-raising events/activities (list details in Part IV of Schedule 2)

+ \$ Nil

Voting day party/appreciation notices

+ \$ Nil

Office expenses incurred after voting day

+ \$ Nil

Phone and/or Internet expenses incurred after voting day

+ \$ Nil

Salaries, benefits, honoraria, professional fees incurred after voting day

+ \$ Nil

Bank charges incurred after voting day

+ \$ Nil

Interest charged on loan after voting day

+ \$ Nil

Expenses related to recount

+ \$ Nil

Expenses related to controverted election

+ \$ Nil

Expenses related to compliance audit

+ \$ \_\_\_\_\_

Expenses related to candidate's disability (provide full details)

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

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

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

Other (provide full details)

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

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

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

**Total Expenses not subject to spending limit**

= \$ - C3

**Total Campaign Expenses (C2 + C3)**

= \$ \_\_\_\_\_ C4

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

Excess (deficiency) of income over expenses (Income – Total Expenses)  
(C1 – C4)

+ \$ Nil D1

Eligible deficit carried forward by the candidate from the last election

- \$ Nil D2

**Total (D1 – D2)**

= \$

If there is a surplus, deduct any refund of candidate's or spouse's contributions to the campaign

- \$ Nil

Surplus (or deficit) for the campaign

= \$ Nil D3

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

**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 \$
			Nil

Name	Full Address	Description of Goods or Services	Value \$
<input type="checkbox"/> Additional information is listed on separate supplementary attachment			<b>Total</b> Nil



Description	Date Acquired (yyyy/mm/dd)	Supplier	Current Market Value \$	Quantity	Total Value \$
<input type="checkbox"/> Additional information is listed on separate supplementary attachment					<b>Total</b> Nil



**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

+ \$ \_\_\_\_\_ 2A  
X \_\_\_\_\_ 2B

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

= \$ NIL

**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)**

= \$ NIL

**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)**

= \$ NIL

**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)**

= \$ NIL

**Auditor's Report****Municipal Elections Act, 1996 (Section 78)**

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)
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**Contact Information**

Last Name	First Name	Licence Number
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Address		
Suite/Unit No.	Street No.	Street Name

City/Town	Province	Postal Code
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Telephone No. (including area code) ext.	Fax No.	Email Address
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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 78 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.