

**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	09

 to 

YYYY	MM	DD
2014	12	31

 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

CORDOVA

Given Name(s)

CYNTHIA

Name of office for which the candidate sought election

Ward name or no. (if any)

YORK REGION DISTRICT SCHOOL BOARD (ENGLISH PUBLIC TRUSTEE) ee

Name of Municipality

TOWN OF GEORGINA

Spending limit issued by clerk

\$ 29,174.85

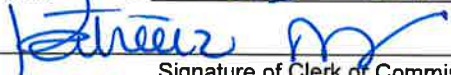
 I did not accept any contributions or incur any expenses other than the nomination fee. (Complete Box A and B only)

**Box B: Declaration**

I, Cynthia Cordova, a candidate in the municipality of TOWN OF GEORGINA, 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 TOWN OF GEORGINA

 on (yyyy/mm/dd) 2015 MARCH 26


Signature of Clerk or Commissioner

2015 MARCH 26 9:08 am

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



Signature of Candidate

PATRICIA R. NASH, Deputy Clerk  
Town of Georgina, and by virtue of office  
is a Commissioner of Oaths and Affidavits  
in the Regional Municipality of York.

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

**LOAN**

Name of bank or recognized lending institution \_\_\_\_\_  
Amount borrowed \$ 0

**INCOME**

Total amount of all contributions (From line 1A in Schedule 1) + \$ 647.29  
Refund of nomination filing fee + \$ 100.00  
Sign deposit refund + \$ 0  
Revenue from fund-raising events not deemed a contribution (From Part III of Schedule 2) + \$ 0  
Interest earned by campaign bank account + \$ 0  
Other (provide full details) \_\_\_\_\_  
1. \_\_\_\_\_ + \$ 0  
2. \_\_\_\_\_ + \$ 0  
3. \_\_\_\_\_ + \$ 0  
**Total Campaign Income (Do not include loan)** = \$ 747.29 C1

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

**Expenses subject to spending limit**

Nomination filing fee + \$ 100  
Inventory from previous campaign used in this campaign (list details in Table 5 of Schedule 1) + \$ \_\_\_\_\_  
Advertising + \$ 240.77  
Brochures/flyers + \$ 162.00  
Signs (including sign deposit) + \$ 225.00  
Meetings hosted + \$ 19.44  
Office expenses incurred until voting day + \$ 0  
Phone and/or Internet expenses incurred until voting day + \$ 0  
Salaries, benefits, honoraria, professional fees incurred until voting day + \$ 0  
Bank charges incurred until voting day + \$ 0  
Interest charged on loan until voting day + \$ 0  
Other (provide full details) \_\_\_\_\_  
1. \_\_\_\_\_ + \$ 0  
2. \_\_\_\_\_ + \$ 0  
3. \_\_\_\_\_ + \$ 0  
**Total Expenses subject to spending limit** = \$ 747.29 C2

**Expenses not subject to spending limit**

Accounting and audit + \$ 0  
Cost of fund-raising events/activities (list details in Part IV of Schedule 2) + \$ 0  
Voting day party/appreciation notices + \$ 0  
Office expenses incurred after voting day + \$ 0  
Phone and/or Internet expenses incurred after voting day + \$ 0  
Salaries, benefits, honoraria, professional fees incurred after voting day + \$ 0  
Bank charges incurred after voting day + \$ 0  
Interest charged on loan after voting day + \$ 0  
Expenses related to recount + \$ 0  
Expenses related to controverted election + \$ 0  
Expenses related to compliance audit + \$ 0  
Expenses related to candidate's disability (provide full details) \_\_\_\_\_  
1. \_\_\_\_\_ + \$ 0  
2. \_\_\_\_\_ + \$ 0  
3. \_\_\_\_\_ + \$ 0  
Other (provide full details) \_\_\_\_\_  
1. \_\_\_\_\_ + \$ 0  
2. \_\_\_\_\_ + \$ 0  
3. \_\_\_\_\_ + \$ 0  
**Total Expenses not subject to spending limit** = \$ 0 C3

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

= \$ 747.29 C4

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

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

+ \$ ~~747.29~~<sup>22</sup> D1 747.29 ll

Eligible deficit carried forward by the candidate from the last election

- \$ ~~747.29~~ D2 747.29 ll

**Total (D1 – D2)**

= \$ ~~0~~

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

- \$ 0

Surplus (or deficit) for the campaign

= \$ 0 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 \$ 0 paid to municipal clerk in the municipality of TOWN OF GEORGINA NA



Name	Full Address	Amount \$
/		
<input type="checkbox"/> Additional information is listed on separate supplementary attachment		<b>Total</b> <span style="float: right;">0</span>

**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> <span style="float: right;">0</span>

**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 \$
/			

Name	Full Address	Description of Goods or Services	Value \$

Additional information is listed on separate supplementary attachment

**Total**

Ø



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>

0



**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 N/A

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)**

= \$ 0

**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)**

= \$ 0

**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)**

= \$ 0

**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)**

= \$ 0

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

NA

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

First Name

Licence Number

Address

Suite/Unit No.

Street No.

Street Name

City/Town

Province

Postal Code

Telephone No. (including area code)  
ext.

Fax No.

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 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.