



**ELECTIONS BC**  
A non-partisan Office of the Legislature

# ANNUAL FINANCIAL REPORT POLITICAL PARTY

F-P(A) (08/09)

PLEASE PRINT IN BLOCK LETTERS

For Period 2009/01/01 to 2009/12/31  
YYYY/MM/DD                      YYYY/MM/DD

Amendment # \_\_\_\_\_

REGISTERED POLITICAL PARTY <b>PEOPLE'S FRONT</b>			
FINANCIAL AGENT'S LAST NAME <b>SPROULE</b>		FIRST NAME <b>BRIAN</b>	MIDDLE NAME(S) <b>K</b>
FINANCIAL AGENT'S MAILING ADDRESS <b>18-3370 DEWDNEY TRUNK ROAD</b>			
CITY/TOWN <b>PORT MOODY, BC</b>	POSTAL CODE <b>V3H 2E3</b>	PHONE NUMBER <b>604-949-0777</b>	FAX NUMBER
EMAIL ADDRESS <b>brian.sproule@shaw.ca</b>			

This financial report includes the following forms:

		FORMS CHECKLIST
Statement of Assets and Liabilities –	Form St-A&L	X <input checked="" type="checkbox"/>
Statement of Income and Expenses –	Form St-I&E	<input checked="" type="checkbox"/>
Summary of Political Contributions by Class –	Form Sm-C	<input checked="" type="checkbox"/>
Political Contributions of Money/Property/Services over \$250 –	Form S-A1	<input checked="" type="checkbox"/>
Permitted Anonymous Contributions Accepted at Functions –	Form S-A2	<input checked="" type="checkbox"/>
Combined Contributions to Political Party, Constituency Association, etc. –	Form S-A1-A	<input checked="" type="checkbox"/>
Prohibited Contributions –	Form S-Ax	<input checked="" type="checkbox"/>
Summary of Fundraising Functions –	Form Sm-F	<input checked="" type="checkbox"/>
Fundraising Function –	Form S-F	<input checked="" type="checkbox"/>
Loans and Guarantees –	Form S-L1	<input checked="" type="checkbox"/>
Loans/Debts Forgiven/Written Off –	Form S-L2	<input checked="" type="checkbox"/>
Transfers Received –	Form S-T-Rcv	<input checked="" type="checkbox"/>
Transfers Given –	Form S-T-Giv	<input checked="" type="checkbox"/>

I, the Financial Agent, declare that:  
 (a) I am authorized to act on behalf of the above-named organization;  
 (b) this report and appropriate forms have been prepared in accordance with the *Election Act*; and  
 (c) to the best of my knowledge, information and belief, all the information contained in this statement is complete and accurate.

SIGNATURE OF FINANCIAL AGENT <i>Brian K. Sproule</i>	DATE (YYYY / MM / DD) <b>2010/03/07</b>
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**WARNING:** Signing a false statement is a serious offence and is subject to significant penalties.



# STATEMENT OF ASSETS AND LIABILITIES

St-A&L (03/01)

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AS OF DATE (YYYY / MM / DD)

2009/12/31

NAME OF FILING ENTITY  
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### Current Assets

Cash on hand

—

Cash on deposit

—

Accounts receivable

—

Bonds, stocks, other investments

—

Inventory

—

Other (describe)

—

**Total Current Assets**

**NIL**

### Fixed Assets

Investments

—

Furniture and fixtures

—

(less accumulated amortization)

( )

—

Office equipment

—

(less accumulated amortization)

( )

—

Land and buildings

—

(less accumulated amortization)

( )

—

Other (describe)

—

(less accumulated amortization)

( )

—

**Total Fixed Assets**

**NIL**

**Total Assets**

**NIL**

**A**

### Current Liabilities

Accounts payable

NIL

Wages, salaries payable

NIL

Loans payable

NIL

Other (describe)

**Total Current Liabilities**

**NIL**

### Long-term Liabilities

Loans payable

NIL

Other (describe)

NIL

**Total Long-term Liabilities**

**NIL**

**Total Liabilities**

**NIL**

**B**

**Accumulated Surplus (Deficit) (A - B)**

**NIL**

**C**

# STATEMENT OF INCOME AND EXPENSES

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NAME OF FILING ENTITY

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**Income:**

- Total political contributions (box E, form Sm-C)
- Gross fundraising income not reported as political contributions (box E, form Sm-F)
- Total transfers received (box A, form S-T-Rcv)
- Interest income
- Product sales
- Advertising income
- Rental income

Other income (describe)

**Total Income**

**A**

**Expenses:**

- Accounting and audit services
- Amortization expense
- Bad debt expense
- Bank charges
- Donations and gifts
- Convention, workshop and meeting fees and rentals
- Data processing / Information technology
- Furniture and equipment
- Insurance
- Interest expense
- Media advertising
- Newsletters and promotional materials (signs, brochures, etc.)
- Office rent, utilities and maintenance
- Office supplies, stationery
- Postage and courier
- Professional services
- Research and polling
- Salaries and benefits
- Social functions/thank-you parties
- Subscriptions and dues
- Telecommunications
- Travel
- Total cost of fundraising functions (box B, form Sm-F)
- Total transfers given (box A, form S-T-Giv)

Other expenses (describe)

**Total Expenses**

*NIL*

**B**

**Period Surplus (Deficit) (A - B)**

*NIL*

**C**



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# SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (06/11)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

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Total value of contributions from each of the following classes of contributor:

Contributions greater than \$250

Contributions of \$250 or less

Individuals	1a	1b
Corporations	2a	2b
Unincorporated Business/Commercial Organizations	3a	3b
Trade Unions	4a	4b
Non-profit Organizations	5a	5b
Other Identifiable Contributors	6a	6b

Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1)	A	B
---	---	---

Classified totals (A + B)	C
------------------------------	---

Total anonymous contributions (from box A, S-A2)	D
---	---

Total value of all political contributions from all sources (C + D)	E
--	---

Total contributions of money	F
------------------------------	---

Total contributions of goods, services and discounts (includes contributions through loans and debts)	G
--	---

(boxes F + G must equal box E)

Number of contributors who made contributions of \$250 or less in total value	H
---	---

Total dollar amount of all income tax receipts issued for political contributions received (Leadership Contestants cannot issue tax receipts)	\$ I
--	------



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# POLITICAL CONTRIBUTIONS OF MONEY, PROPERTY OR SERVICES WITH A VALUE GREATER THAN \$250

S-A1 (08/01)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY  
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FULL NAME OF CONTRIBUTOR <small>(If a numbered corporation or an unincorporated organization, include full names of two directors)</small>	CLASS OF CONTRIBUTOR* <small>(X APPROPRIATE CLASS)</small>						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION <small>(YYYY/MM/DD)</small>	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			

\* CLASS OF CONTRIBUTOR:  
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

TOTAL OF INDIVIDUAL CONTRIBUTIONS **A**

ORIGINAL — CHIEF ELECTORAL OFFICE  
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# PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2 (99/06)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY  
*PEOPLE'S FRONT*

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DATE OF FUNCTION	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
TOTAL			A

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## COMBINED CONTRIBUTIONS TO POLITICAL PARTY, CONSTITUENCY ASSOCIATIONS AND CANDIDATES WITH A TOTAL VALUE GREATER THAN \$250

S-A1-A (08/01)

NAME OF FILING ENTITY  
**PEOPLE'S FRONT**

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FULL NAME OF CONTRIBUTOR <small>(If a numbered corporation or an unincorporated organization, include full names of two directors)</small>	CLASS OF CONTRIBUTOR* <small>(X APPROPRIATE CLASS)</small>						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION <small>(YYYY / MM / DD)</small>	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			
<b>BARBARA BILEY</b>	<b>X</b>						<b>\$ 256.50</b>	<b>2009/04/23</b>	<b>\$ 256.50</b>

TOTAL OF INDIVIDUAL CONTRIBUTIONS **A \$ 256.50**

\* CLASS OF CONTRIBUTOR:  
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER



**COMBINED CONTRIBUTIONS TO POLITICAL PARTY,  
CONSTITUENCY ASSOCIATIONS AND CANDIDATES  
WITH A TOTAL VALUE GREATER THAN \$250**

S-A1-A (99/06)

**SEE AMENDMENT**

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FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated organization, include full names of two directors)	CLASS OF CONTRIBUTOR* (✓ APPROPRIATE CLASS)						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			

\* CLASS OF CONTRIBUTOR:  
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

**TOTAL OF INDIVIDUAL CONTRIBUTIONS**    **A**

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# PROHIBITED CONTRIBUTIONS

S-Ax (99/06)

NAME OF FILING ENTITY  
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DATE RECEIVED	CIRCUMSTANCES	AMOUNT	DATE RETURNED	OR	DATE REMITTED TO CHIEF ELECTORAL OFFICE
TOTAL		A			

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# SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Sm-F (08/09)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY <b>PEOPLE'S FRONT</b>	
Number of fundraising functions held	<input type="text"/>
Total gross fundraising function income (sum of boxes K on all S-F forms)	<input type="text"/> <b>A</b>
Total cost of fundraising functions (sum of boxes L on all S-F forms)	<input type="text"/> <b>B</b>
Total net income (or loss) from fundraising functions (A - B)	<input type="text"/> <b>C</b>
Total amount of gross income reported as political contributions (sum of boxes F on all S-F forms)	<input type="text"/> <b>D</b>
Total amount of gross income NOT reported as political contributions (sum of boxes J on all S-F forms)	<input type="text"/> <b>E</b>
(boxes D + E must equal box A)	
<b>For election financing reports only (see instructions in the Election Financing Report Completion Guide before completing this section)</b>	
Total cost of fundraising functions held during the 60 day pre-campaign period, which did not incur net losses	<input type="text"/> <b>F</b>
Total cost of fundraising functions held during the campaign period, which did not incur net losses	<input type="text"/> <b>G</b>
Total cost of fundraising functions held during the 60 day pre-campaign period and the campaign period, which did not incur net losses (F + G)	<input type="text"/> <b>H</b>
Total cost of fundraising functions held outside the 60 day pre-campaign period and the campaign period	<input type="text"/> <b>I</b>
Total net losses of fundraising functions which incurred net losses during the campaign period	<input type="text"/> <b>J</b>



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# FUNDRAISING FUNCTION

S-F (99/06)

(Submit a separate form for each function held)

If form is for Nomination Contestant, please tick

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NAME OF FILING ENTITY <b>PEOPLE'S FRONT</b>				
DATE OF EVENT (YYYY/MM/DD)		DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY)		
<b>Gross income reported as political contributions</b>				
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by organizations			A	
Purchases by individuals of more than \$250 worth of tickets			B	
Purchases by individuals of tickets that are more than \$50 each			C	
Other gross income reported as contributions, including anonymous contributions (provide full details)				
			D	
			E	
Total gross income reported as political contributions (A + B + C + D + E)				F
<b>Gross income not reported as political contributions</b>				
	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by individuals of tickets of \$50 or less			G	
Other gross income not reported as contributions (provide full details)				
			H	
			I	
Total gross income not reported as political contributions (G + H + I)				J
Total gross income (box F + J)				K
Total cost of function				L
Net income (loss) (box K - L)				M



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# LOANS AND GUARANTEES

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NAME OF FILING ENTITY  
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DATE RECEIVED (YYYY/MM/DD)	FULL NAMES OF LENDER AND/OR GUARANTOR	CLASS* (X)						CONDITIONS (if applicable)	DUE DATE (YYYY/MM/DD)	ORIGINAL AMOUNT OF LOAN/GUARANTEE \$	AMOUNT OF LOAN OUTSTANDING \$	INT. RATE %	PRIME RATE %	A	B	C
		1	2	3	4	5	6							AMOUNT OF INTEREST PAYABLE AT PRIME RATE \$	AMOUNT OF INTEREST BEING CHARGED \$	BENEFIT/ CONTRIBUTION (A - B) \$
									TOTAL	D		E		TOTAL	F	

\* CLASS OF CONTRIBUTOR:  
 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

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## LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2 (99/06)

NAME OF FILING ENTITY <b>PEOPLE'S FRONT</b>
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PAGE <input style="width: 20px; border: none;" type="text" value="1"/>
OF <input style="width: 20px; border: none;" type="text" value="1"/>

DATE RECEIVED	FULL NAME OF LENDER / CREDITOR	CLASS OF CONTRIBUTOR* (✓ APPROPRIATE CLASS)						CONDITIONS (if applicable)	AMOUNT OF LOAN / DEBT \$	AMOUNT OF LOAN / DEBT FORGIVEN / WRITTEN OFF \$	
		1	2	3	4	5	6				
<b>TOTALS</b>								<b>A</b>		<b>B</b>	

\* CLASS OF CONTRIBUTOR:  
1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,  
4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER

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# TRANSFERS RECEIVED

S-T-Rcv (99/06)

NAME OF FILING ENTITY  
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DATE OF TRANSFER	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
<b>TOTAL</b>		



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# TRANSFERS GIVEN

S-T-Giv (99/06)

<small>NAME OF FILING ENTITY</small> PEOPLE'S FRONT
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DATE OF TRANSFER	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
<b>TOTAL</b>		<b>A</b>

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