



ELECTIONS
A non-partisan Office of the Legislature

FINANCING REPORT LEADERSHIP CONTESTANT

F-LC (11/06)

PLEASE PRINT IN BLOCK LETTERS

Amendment # _____

| | | | |
|--|-------------------------------|---------------------------------------|-------------------------------------|
| CONTESTANT'S LAST NAME HANNI | | FIRST NAME WILFRED | MIDDLE NAME(S) IRVINE |
| REGISTERED POLITICAL PARTY BRITISH COLUMBIA HERITAGE PARTY | | | |
| FINANCIAL AGENT'S LAST NAME HANNI | | FIRST NAME WILFRED | MIDDLE NAME(S) IRVINE |
| FINANCIAL AGENT'S MAILING ADDRESS P.O. BOX 30 | | | |
| CITY/TOWN YAHK | POSTAL CODE V0B 2P0 | PHONE NUMBER (250) 424-5222 | FAX NUMBER (250) 424-5222 |
| EMAIL ADDRESS wilf@wilfhanni.ca | | | |

This financing report includes the following forms:

| | | FORMS CHECKLIST |
|---|---------------|-------------------------------------|
| Statement of Income and Expenses – | Form St-I&E-L | <input checked="" type="checkbox"/> |
| Summary of Political Contributions by Class – | Form Sm-C | <input type="checkbox"/> |
| Political Contributions of Money / Property / Services over \$250 – | Form S-A1 | <input type="checkbox"/> |
| Permitted Anonymous Contributions Accepted at Functions – | Form S-A2 | <input type="checkbox"/> |
| Prohibited Contributions – | Form S-Ax | <input type="checkbox"/> |
| Personal Expenses Paid by Financial Agent – | Form Sm-PE1 | <input type="checkbox"/> |
| Personal Expenses Paid by Contestant – | Form Sm-PE2 | <input type="checkbox"/> |
| Summary of Leadership Contestant Fundraising Functions – | Form Sm-F-L | <input type="checkbox"/> |
| Fundraising Function – | Form S-F | <input type="checkbox"/> |
| Loans & Guarantees – | Form S-L1 | <input type="checkbox"/> |
| Loans / Debts Forgiven / Written Off – | Form S-L2 | <input type="checkbox"/> |
| Transfers Received – | Form S-T-Rcv | <input type="checkbox"/> |
| Transfers Given – | Form S-T-Giv | <input type="checkbox"/> |

I, the Financial Agent, declare that:
 (a) I am authorized to act on behalf of the above-named contestant;
 (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 | DATE (YYYY / MM / DD) 2011 / 11 / 02 |
|----------------------------------|---|

WARNING: Signing a false statement is a serious offence and is subject to significant penalties.



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FORMS
CHECKLIST
X

- | | | |
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SEE AMENDMENT

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SIGNATURE OF FINANCIAL AGENT

[Handwritten Signature]

DATE (YYYY / MM / DD)

2011 / 01 / 02

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LEADERSHIP CONTESTANT STATEMENT OF INCOME & EXPENSES

St-I&E-L (11/07)

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| | |
|--|---|
| CONTESTANT'S NAME Wilfred Irvine Hanni | POLITICAL PARTY BC Heritage Party |
|--|---|

| | | | |
|----------------|---|---|--|
| Income: | Total political contributions (box E, form Sm-C) | 0 | |
| | Gross fundraising income not reported as political contributions (box E, form Sm-F-L) | 0 | |
| | Total transfers received (box A, form S-T-Rcv) | 0 | |
| | Interest income | 0 | |
| | Other income (describe) | 0 | |

| | | | |
|--|---|--|---|
| Total Income (sum of above boxes) | 0 | | A |
|--|---|--|---|

| | | | |
|------------------|--|---|--|
| Expenses: | Accounting and audit services | 0 | |
| | Bank charges | 0 | |
| | Convention, workshop and meeting fees and rentals | 0 | |
| | Data processing / information technology | 0 | |
| | Donations and gifts | 0 | |
| | Furniture and equipment | 0 | |
| | Insurance | 0 | |
| | Interest expense | 0 | |
| | Media advertising | 0 | |
| | Newsletter and promotional materials (signs, brochures, etc.) | 0 | |
| | Office rent, utilities and maintenance | 0 | |
| | Office supplies, stationery | 0 | |
| | Personal expenses of contestant (box G, form Sm-PE1) | 0 | |
| | Postage and courier | 0 | |
| | Professional services | 0 | |
| | Research and polling | 0 | |
| | Salaries and benefits | 0 | |
| | Social functions / thank-you parties | 0 | |
| | Telecommunications | 0 | |
| | Travel | 0 | |
| | Total cost of fundraising functions (box B, form Sm-F-L) | 0 | |
| | Total net losses of fundraising functions which incurred net losses (box F, form Sm-F-L) | 0 | |
| | Total transfers given (box A, form S-T-Giv) | 0 | |
| | Other expenses (describe) | 0 | |

| | | | |
|--|---|--|---|
| Total Expenses (sum of above boxes) | 0 | | B |
|--|---|--|---|