



ELECTIONS BC
A non-partisan Office of the Legislature

ANNUAL FINANCIAL REPORT CONSTITUENCY ASSOCIATION

F-CA(A) (08/09)

PLEASE PRINT IN BLOCK LETTERS

For Period 2011 07 13 to 2011/12/31 Amendment # 1
YYYY/MM/DD YYYY/MM/DD

REGISTERED CONSTITUENCY ASSOCIATION			
Richmond East Constituency Association of BC Conservative Party			
REGISTERED POLITICAL PARTY / INDEPENDENT MLA			
Conservative Party			
FINANCIAL AGENT'S LAST NAME	FIRST NAME		MIDDLE NAME(S)
Campbell	Kathleen		Louise
FINANCIAL AGENT'S MAILING ADDRESS			
10291 Bryson Dr.			
CITY / TOWN	POSTAL CODE	PHONE NUMBER	FAX NUMBER
Richmond	V6X 1S79	604-279-8700	604-279-8700
EMAIL ADDRESS			
archie.kathleen@shaw.ca			

This financial report includes the following forms:

		FORMS CHECKLIST
Statement of Assets and Liabilities --	Form St-A&L	<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 type="checkbox"/> N/A
Political Contributions of Money / Property / Services over \$250 --	Form S-A1	<input type="checkbox"/> N/A
Permitted Anonymous Contributions Accepted at Functions --	Form S-A2	<input type="checkbox"/> N/A
Prohibited Contributions --	Form S-Ax	<input type="checkbox"/> N/A
Summary of Fundraising Functions --	Form Sm-F	<input type="checkbox"/> N/A
Fundraising Function --	Form S-F	<input type="checkbox"/> N/A
Loans and Guarantees --	Form S-L1	<input type="checkbox"/> N/A
Loans / Debts Forgiven / Written Off --	Form S-L2	<input type="checkbox"/> N/A
Transfers Received --	Form S-T-Rcv	<input type="checkbox"/> N/A
Transfers Given --	Form S-T-Giv	<input type="checkbox"/> N/A

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 <div style="font-size: 1.5em; font-family: cursive;">Kathleen Campbell</div>	DATE (YYYY / MM / DD) <div style="font-size: 1.2em;">2011/02/25</div>
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties.



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ANNUAL FINANCIAL REPORT CONSTITUENCY ASSOCIATION

F-CA(A) (08/09)

PLEASE PRINT IN BLOCK LETTERS

SEE AMENDMENT

For Period 2011/01/01 to 2011/12/31
YYYY/MM/DD YYYY/MM/DD

Amendment # _____

REGISTERED CONSTITUENCY ASSOCIATION <u>Richmond East Constituency Association of BC Conservative Party</u>			
REGISTERED POLITICAL PARTY / INDEPENDENT MLA <u>Conservative Party</u>			
FINANCIAL AGENT'S LAST NAME <u>Campbell</u>	FIRST NAME <u>Kathleen</u>	MIDDLE NAME(S) <u>Louise</u>	
FINANCIAL AGENT'S MAILING ADDRESS <u>10291 Bryson Dr.</u>			
CITY / TOWN <u>Richmond</u>	POSTAL CODE <u>V6X 1S79</u>	PHONE NUMBER <u>604-279-8700</u>	FAX NUMBER <u>604-279-8700</u>
EMAIL ADDRESS <u>archie.kathleen@shaw.ca</u>			

This financial report includes the following forms:

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

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- (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

Kathleen Campbell

DATE (YYYY / MM / DD)

2011/02/25

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STATEMENT OF ASSETS AND LIABILITIES

St-A&L (03/01)

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AS OF DATE (YYYY / MM / DD)

2001/12/31

NAME OF FILING ENTITY

Richmond East Constituency Assoc. of the BC Conservative Party

Current Assets

Cash on hand

Nil

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

Wages, salaries payable

Loans payable

Other (describe)

Total Current Liabilities

Nil

Long-term Liabilities

Loans payable

Other (describe)

Total Long-term Liabilities

Nil

Total Liabilities

Nil

B

Accumulated Surplus (Deficit) (A - B)

C



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STATEMENT OF INCOME AND EXPENSES

St-I&E (11/05)

PLEASE PRINT IN BLOCK LETTERS

NAME OF FILING ENTITY

Richmond East constituency Assoc. of BC Conservative Party

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 / investment income _____
 Product sales _____
 Advertising income _____
 Rental income _____

Other income (describe)

Total Income

Nil

A

Expenses:

Accounting and audit services _____
 Amortization expense _____
 Bad debt expense _____
 Bank charges _____
 Convention, workshop and meeting fees and rentals _____
 Data processing / information technology _____
 Donations and gifts _____
 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