



ELECTIONS
A non-partisan Office of the Legislature

STATEMENT OF ASSETS AND LIABILITIES

SI-A&L (03/04)

AS OF DATE (YYYY / MM / DD)
2011/12/31

NAME OF FILING ENTITY **CHILLIWACK-HOPE CONSTITUENCY ASSOCIATION - BC CONSERVATIVE PARTY**

Current Assets

Cash on hand	280
Cash on deposit	9
Accounts receivable	
Bonds, stocks, other investments	
Inventory	

Other (describe)

Total Current Assets 289

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 0

Total Assets 289 **A**

Current Liabilities

Accounts payable

Wages, salaries payable

Loans payable

Other (describe)

Total Current Liabilities 0

Long-term Liabilities

Loans payable

Other (describe)

Total Long-term Liabilities 0

Total Liabilities 0 **B**

Accumulated Surplus (Deficit) (A - B) 289 **C**



ELECTIONS
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STATEMENT OF INCOME AND EXPENSES

St-I&E (11/05)

PLEASE PRINT IN BLOCK LETTERS

NAME OF FILING ENTITY
CHILLIWACK-HOPE CONSTITUENCY ASSOCIATION - 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-Rev)	
Interest / investment 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	
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 **B**

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

