DEREGISTRATION FINANCIAL REPORT.



POLITICAL PARTY

PLEASE PRINT IN BLOCK LETTERS

•	2012/05/07	<i>*</i>	
For Period 2012/01/0/ to 2	2012/04/04/0	Amendment #	
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POLITICAL PARTY NATION ALMANCE PURTY	· .	
FINANCIAL AGENT'S LAST NAME FIRST NAME	MIDDLE NAM	IE(S)
WU FOND		
FINANCIAL AGENT'S MAILING ADDRESS		
CITY TOWN POSTAL CODE PHONE NUMBER	FAX NUMBER	2
SURRAY 1029 77868	-6719 604-	98-700L
EMAIL DON'T	346,10 ("	(
This financing report includes the following forms:		FORMS CHECKLIST
Statement of Assets and Liabilities	- Form St-A&L	×
Statement of Income and Expenses -	Form St-I&E	\angle
Summary of Political Contributions by Class -	Form Sm-C	
Political Contributions of Money/Property/Services over \$250 -	Form S-A1	
Permitted Anonymous Contributions Accepted at Functions -	Form S-A2	\square
' Combined Contributions to Political Party, Constituency Association, etc	Form S-A1-A	\searrow
Prohibited Contributions -	Form S-Ax	
Summary of Fundraising Functions -	Form Sm-F	\times
Fundraising Function -	Form S-F	K
Loans and Guarantees –	Form S-L1	\angle
Loans/Debts Forgiven/Written Off –	Form S-L2	\square
Transfers Received	Form S-T-Rcv	
Transfers Given –	Form S-T-Giv	$ \boxtimes $
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	nomolota and sacre	ato.
c) To the best of my knowledge, information and belief, all the information contained in this statement is	combiere and accur	ale.
SIGNATURE OF FINANCIAL AGENT	DATE (YYYY / MM / DD)	
之/5	2012/Alay	//2)
WARNING: Signing a false statement is a serious offence and is subject to significant	t penalties.	,

DEREGISTRATION FINANCIAL REPORT



POLITICAL PARTY

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SEE AMENDMENT

A non-partisan Office of the Legislature	For Period $20/$	2/01/0/ to 20/2/09/0	Amendment#	
	YYY	ALKWIDD / ANALIMIDD /		
POLITICAL PARTY	1710N ALLIA.	NCZ PARTY		
FINANCIAL AGENT'S LAST NAM		FIRST NAME 1-DNG	MIDDLE NAME	E(S)
FINANCIAL AGENT'S MAILING	ADDRESS 4 A AVZ	I DIONE WHITE	CAVANTIMADEO	
SURROY		POSTAL CODE PHONE NUMBER V3W1 029 1778-638-	5269 604-9	. ^ . / /
EMAIL			,	
This financing report incl	ludes the following forms:			FORMS CHECKLIST X
		Statement of Assets and Liabilities –	Form St-A&L	\boxtimes
		Statement of Income and Expenses -	Form St-I&E	\angle
	Sum	mary of Political Contributions by Class -	Form Sm-C	\angle
	Political Contributions of	of Money/Property/Services over \$250 -	Form S-A1	\square
	Permitted Anonymor	us Contributions Accepted at Functions –	Form S-A2	
	Combined Contributions to Politic	al Party, Constituency Association, etc	Form S-A1-A	
		Prohibited Contributions –	Form S-Ax	
		Summary of Fundraising Functions –	Form Sm-F	\boxtimes
		Fundraising Function –	Form S-F	
		Loans and Guarantees –	Form S-L1	\angle
		Loans/Debts Forgiven/Written Off -	Form S-L2	
		Transfers Received	Form S-T-Rcv	
,		Transfers Glven –	Form S-T-Giv	
(b) This report and appropr	on behalf of the above-named organi riate forms have been prepared in ac		omplete and accura	ate.
SIGNATURE OF FINANCIAL AGE	NT Q Q	7.1	DATE (YYYY / MM / DD)	i i
	2/5		2012/Alay	1/2)
/ WARNI	ING: Signing a false statement is a	serious offence and is subject to significant	penalties.	

STATEMENT OF ASSETS AND LIABILITIES



2012 | 05 | 07 | AS OF DATE (YYYY / MM / DD) | 2012 | 64/01

The state of the s	1.1.102	Danty	
NAME OF FILING ENTITY ATION AL	HANCO	MAKI/	
Current Assets	Cash on hand	Ü	
, dansamente	Cash on deposit	O	
	Accounts receivable	D	
Bonds, str	ocks, other investments	0	
	Inventory	Ü	
Other (describe)			
		Total Current Assets	
*			
Fixed Assets Investments		<u> </u>	
Furniture and fixtures	,	D	
(less accumulated amortization)		<u></u>	
Office equipment			· !
(less accumulated amortization)	()	Ů.	
Land and buildings			
(less accumulated amortization)	()	[]	
Other (describe)	·		•
(less accumulated amortization)	()	0	•
•	·	Total Fixed Assets	D
		Total Assets	// A
		IOtal Assets	
A L. L. Martin.	Accounts payable	0	
Current Liabilities W	Vages, salaries payable	v	
	Loans payable	0	
Other (describe)			
	То	tal Current Liabilities	D
	Loans payable	0	
Long-term Liabilities Other (describe)	Louno payabio		•
Other (describe)	Total	Long-term Liabilities	
	iotai		
		Total Liabilities	O B
	Accumulated Su	rplus (Deficit) (A – B)	() c
· ·			

STATEMENT OF ASSETS AND LIABILITIES



		SE	EAMENDIVENT
ELECTIONS ASC A non-partisan Office of the Legislature	AS OF DATE (YYYY / MM / DC 2012/64/6)	1818181
NAME OF FILING ENTITY	ALLIANCE	PIARTY	
Current Assets	Cash on hand	0	
	Cash on deposit Accounts receivable	0	
	Bonds, stocks, other investments	0	
	Inventory	0	. :
Other (describe)		Total Current Assets	
,	/	7 Iolai Curient Assets	
Fixed Assets Inv	estments	0	
Furniture an	d fixtures		1
(less accumulated amo	ortization) ()	0	
	quipment	J.]
(less accumulated amo	ortization) ()]	
Land and	A	<u> </u>	1
(less accumulated amo	mization) []	J !
Other (describe) (less accumulated amo	ortization) (0	
		Total Fixed Assets	D
		Total Assets	O A
Current Liabilities	Accounts payable Wages, salaries payable	<i>v v</i>	
	Loans payable	0	
Other (describe)			
	<u>ា</u>	otal Current Liabilities	U
Long-term Liabilities	Loans payable	O	
Other (describe)	the state of the s		
	Tota	il Long-term Liabilities	
/		Total Liabilities	O B
	Accumulated S	urplus (Deficit) (A – B)	() c



STATEMENT OF INCOME AND EXPENSES

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NAME OF FILING ENTITY NATION ALZIANUE PARTY		
Income: Total political contributions (box E, form Sm-C)	20	
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		•
Rentai income		
Other income (describe)		
·		
Total Income	20	A
Expenses: Accounting and audit services		
Amodization expense		
Bad debt expense	7.7	
Bank charges	12	
Convention, workshop and meeting lees 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	8	
Professional services		
Research and polling		
Salaries and benefits		
Social functions / thank-you parties	· · · · · · · · · · · · · · · · · · ·	
Subscriptions and dues		
Telecommunications		
to the second		•
Travel		
Total cost of fundraising functions (box B, form Sm-F)		
Total transfers given (box A, form S-T-Gîv)		
Other expenses (describe)		
· · · · · · · · · · · · · · · · · · ·		.
Total Expenses	20 B	4
Period Surplus (Deficit) (A – B)	<i>C</i> 7 C	
,	****	



SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

If form is for Nomination Contestant, please tick \Box

MEOFFILINGENTITY Nation Alliance	Party		<u>-</u>
tal value of contributions from each the following classes of contributor:	•		
	Contributions greater than \$250	Contributions of \$250 or less	of
Individuals	11	\$2/2	1b
Corporations	. 22	1 .	2b
Unincorporated Business / Commercial Organizations	3a		3b
Trade Unions	4a		4b
Non-profit Organizations	5a		5b
Other Identifiable Contributions	6a		6b
		J 4,	
Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1)	. A	20.00	В
(2, (2), (2)	Classified tota	Jo L	
	Classified total (A + I		С
Total a	anonymous contribution (from box A, S-A)		D
Total value of all political contr	ibutions from all source (C + E	20.00	E
· · · · · · · · · · · · · · · · · · ·	·		
Tota	I contributions of mone	x \$20	F
Total contributions of goods (includes contributions th			G pox E)
	. •		
Number of contributors of \$2	who made contribution 50 or less in total value	1 1	H
Total dollar amount of all income tax receipts issued for politica (Leadership Contestants ca			



SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (06/11)

If form is for Nomination Contestant, please tick \Box

NAME OF FILING ENTITY		*****		
Total value of contributions from each of the following classes of contributor:				
	Contributions greater than \$250	_	Contributions of \$250 or less	
Individuals		1a	720	1b
Corporations		2a	. '	2b
Unincorporated Business / Commercial Organizations		3а	4	3b
Trade Unions		4a		4b
Non-profit Organizations		5a		5b
Other Identifiable Contributions		6a		6b
Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1)		А		В
	Classified t (A	otals +B)		С
Total	anonymous contribu (from box A, S			а
Total value of all political cont		rces + D)		E
Tota	al contributions of me	oney	\$20	F
Total contributions of goods (includes contributions		ebts)	(boxes F + G must equal b	G oox E)
Number of contributors of \$	who made contribut 250 or less in total v			Н
Total dollar amount of all income tax receipts issued for politic (Leadership Contestants o			\$ 20	I



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 //	12.	Z.7)	41	y/	7=	-	PARTY		· · · · · · · · · · · · · · · · · · ·	PAGE
FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated organization, include full names of two directors)		ASS (APP	OF CO	ONTRI RIATE	BUTO CLAS		INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION (YYYY/MM/DD)	TOT CONTR CONTR	TALOF IBUTOR'S IBUTIONS
								·		
•										
							·			
·										

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										•
* CLASS OF CONTRIBUTOR: 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER	٧,	c		TO INDI RIBI		JAL	A			



PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2 (99/06)

ECTIONS DOG prepartison Office of the Legislature	If form is for Nomination Contestant, please tick		
DATE OF	NAME OF FILING ENTITY NATION (1-12) ANCO PIRTY		PAGE
DATE OF FUNCTION	DESCRIPTION OF FUNCTION	NUMBER OF	of _
		NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
		-	
		!	
			•
-			
		TOTAL	
AL — CHIEF ELECTORAL OFF KEEP A COPY FOR YOUR RECO	ICE	TOTAL	()

This form is available for public inspection at the Chief Electoral Office during regular office hours.

ELECTIONS A non-partisan Office of the Legislature

SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY NATION ALLIANCY PARTY
Number of fundraising functions held
Total gross fundraising function income (sum of boxes K on all S-F forms)
Total cost of fundraising functions (sum of boxes L on all S-F forms)
Total net income (or loss) from fundraising functions (A – B)
Total amount of gross income reported as political contributions (sum of boxes F on all S-F forms)
Total amount of gross income NOT reported as political contributions (sum of boxes J on all S-F forms) (boxes D + E must equal box A)
For election financing reports only (see instructions in the Election Financing Report Completion Guide before completing this section)
Total cost of fundraising functions held during the 60 day pre-campaign period and the campaign period
Total cost of fundraising functions held outside the 60 day pre-campaign period and the campaign period G
Total net losses of fundraising functions which incurred net losses during the campaign period

FUNDRAISING FUNCTION

S-F (99/06)



(Submit a separate form for each function held)

CHECK HER BENEFO STA	If form is for Nomination Co	ontestant, please tick		OF
NAME OF FILING ENTITY	DESCRIPTION OF FUNDRAISING EVENT	AND JOINT EVENT, IDENTIFY OTH	IRTY ERENTITY)	
Purchases by individuals of \$250 world	Cal contributions Number of Tickets Sold anizations more than	Charge per Ticket	Total Charges Collected A B	Tick if Charge per Ticket Varies
Purchases by individuals that are more than	s of tickets \$50 each		С	
Other gross income reported as co	Total gross income reported as		E	() F
Gross income not reported as p Purchases by ind tickets of \$	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Other gross income not reported a	s contributions (provide full deta	ails)	H	
	Total gross income not re		outions (G + H + I)	J
			al cost of function (loss) (box K – L)	

LOANS AND GUARANTEES



PLEASE PRINT IN BLOCK LETTERS

non-partisan Offic	e of the Legislature	NAME OF FILING R	тпү	1	1/	I	1) //	AL	214/	UCG	10	AR	11		PAGE OF
DATE RECEIVED (YYYY/MM/DD)	FULL NAMES AND/OR GU.	OF LENDER ARANTOR	1	2	CLAS: (X)	s [,]	6	CONDITIONS (if applicable)	DUE DATE (YYYY/MM/DD)	ORIGINAL AMOUNT OF LOAN/GUARANTEE \$	AMOUNT OF LOAN OUTSTANDING \$	INT. RATE %	PRIME RATE %	AMOUNT OF INTEREST PAYABLE AT PRIME RATE S	AMOUNT OF INTEREST BEING CHARGED S	SENEFIT! CONTRIBUTION (A - B) S
																
1	-															
									-							
						_										
CLASS OF COM	TDIDLITOR:															
* CLASS OF CONTRIBUTOR: 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUINESS/CXMMERCIAL ORGANIZATION, 4 - TRADE UNION, 5 - NON-PROFIT ORGANIZATION, 6 - OTHER											E 0	ļ			TOTAL	F 0



ELECTIONS &C

LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

	To Laboratory	NAME OF FILING ENTITY		4	22	/,	4	L	1(E PART	Y	PAGE OF
DATE RECEIVED		FULL NAME OF LENDER / CREDITOR	CLASS OF CONTRIBUTOR* (CONDITIONS (If applicable)	AMOUNT OF LOAN / DEBT \$	AMOUNT OF LOAN / DEBT FORGIVEN / WRITTEN OFF S	
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* CLASS OF CONTI 1 - INDIVIDUAL, 2 4 - TRADEUNION,	RIBUTOR: CCRPORATION, 3 U , 5 NON-PROFIT ORGA	NINCORPORATED BUSINESS/COMMERCIAL ORGA ANIZATION, 6 OTHER	NIZATION.							TOTALS	A O	В

TRANSFERS RECEIVED



s non-partisan Office of the Legis		
	NAME OF FILING ENTITY ALATION ALLIANCE PADTY	PAGE
DATE OF TRANSFER	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
	·	, , , , , , , , , , , , , , , , , , ,
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	TOTAL	A (?)

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This form is available for public inspection at the Chief Electoral Office during regular office hours.





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DATE OF TRANSFER	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
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1		
	TOTAL	A ()