



ANNUAL FINANCIAL REPORT

F-P(A) (89/11)

POLITICAL PARTY

PLEASE PRINT IN BLOCK LETTERS OR TYPE

For Period 2006/01/01 to 2006/12/31
YYYYMMDD YYYYMMDD

Amendment # _____

REGISTERED POLITICAL PARTY			
YOUR POLITICAL PARTY OF BC			
FINANCIAL AGENT'S SURNAME		FIRST NAME	INITIAL(S)
FILIPPELLI		JAMES	J.
FINANCIAL AGENT'S MAILING ADDRESS			
174 TURTLEHEAD RD.			
CITY/TOWN	POSTAL CODE	PHONE NUMBER	FAX NUMBER
BELCARA	V3H 4P1	(604) 805-3547	()
EMAIL ADDRESS			
james@ypofbc.ca			

This financial report includes the following forms:

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

DATE: (YYYYMMDD)

2007/04/01

WARNING: Signing a false statement is a serious offence and is subject to significant penalties [Section 268].



STATEMENT OF ASSETS AND LIABILITIES

SI-A&L (99/05)

ELECTIONS BC
A non-partisan Office of the Legislature

AS OF DATE (YYYY / MM / DD)

2006 / 12 / 31

NAME OF FILING ENTITY

YOUR POLITICAL PARTY OF BC

Current Assets

Cash on hand

0

Cash on deposit

\$ 87

Accounts receivable

Bonds, stocks, other investments

Inventory

Other (describe)

Total Current Assets

\$ 87

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

\$ 87

A

Current Liabilities

Accounts payable

\$ 465

Wages, salaries payable

Loans payable

Other (describe)

Total Current Liabilities

\$ 465

Long-term Liabilities

Loans payable

Other (describe)

Total Long-term Liabilities

0

Total Liabilities

\$ 465

B

Accumulated Surplus (Deficit) (A - B)

(378)

C



STATEMENT OF INCOME AND EXPENSES

SI-1&E (02/01)

ELECTIONS BC
A Branch of the Office of the Lieutenant Governor

NAME OF FILING ENTITY

YOUR POLITICAL PARTY OF BC

Income:

Total political contributions (box E, form Sm-C)	<i>\$40</i>
Gross fundraising income not reported as political contributions (box E, form Sm-F)	
Total transfers received (box A, form S-T-Rev)	
Interest income	
Product sales	
Advertising income	
Rental income	

Other income (describe)

Total Income

\$40 A

Expenses:

Accounting and audit services	
Amortization expense	
Bad debt expense	
Bank charges	
Brochures (pamphlets, flyers, etc.)	
Contributions to other organizations	
Convention, workshop and meeting fees and rentals	
Data processing	
Furniture and equipment	
Gifts	
Insurance	
Interest expense	
Media advertising	
Newsletters	
Office rental	
Office supplies, stationery	<i>2.00</i>
Postage & courier	<i>10.00</i>
Printing	<i>3.00</i>
Professional services	
Research & polling	
Salaries & benefits	
Signs (law signs, billboards, etc.)	
Social functions	
Subscriptions & dues	
Telecommunications	<i>247.00</i>
Travel	
Utilities & maintenance	
Victory/thank-you parties	
Total cost of fundraising functions (box B, form Sm-F)	
Total transfers given (box A, form S-T-Giv)	

Other expenses (describe)

Total Expenses

(203) B

Period Surplus (Deficit) (A - B)

(223) C

SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS



If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

YOUR POLITICAL PARTY OF BC

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

	Contributions greater than \$250	Contributions of \$250 or less
Individuals	1a	\$40 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 \$40 B

Classified totals (A + B) C \$40

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

Total value of all political contributions from all sources (C + D) E \$40

Total contributions of money F \$40

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 2

Total dollar amount of all income tax receipts issued for political contributions received \$40

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

S-A1 (99/08)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

Your Political Party of BC

PAGE

OF

FULL NAME OF CONTRIBUTOR
(If a numbered corporation or an unincorporated organization, include full name of two directors)

CLASS OF CONTRIBUTOR*
(If appropriate class)

INDIVIDUAL CONTRIBUTION AMOUNTS

DAYS OF EACH INDIVIDUAL CONTRIBUTION

TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS

1 2 3 4 5 6

[Handwritten scribbles and a large diagonal line crossing out the table content]

TOTAL OF INDIVIDUAL CONTRIBUTIONS

A

LEGISLATOR:
1 - CORPORATION, 2 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,
3 - NON-PROFIT ORGANIZATION, 4 - OTHER

CHIEF ELECTORAL OFFICE
COPY FOR YOUR RECORDS

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



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PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY: YOUR POLITICAL PARTY OF BC

DATE OF FUNCTION	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDED	TOTAL AS

(Large handwritten scribble crossing out the table)

TOTAL A

Total dollar amount of all income tax receipts issued for political contributions received: \$

ORIGINAL — CHIEF ELECTORAL OFFICE
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* CLASS OF CONT
 1 — INDIVIDUAL
 2 — ORGANIZATION
 3 — TRADE UNION
 4 — TRADE ASSOCIATION

ORIGINAL — PLEASE KEEP A COPY FOR YOUR RECORDS



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PROHIBITED CONTRIBUTIONS

S-Ax (99/06)

NAME OF FILING ENTITY: YOUR POLITICAL PARTY OF BC

PAGE
OF

DATE RECEIVED	CIRCUMSTANCES	AMOUNT	DATE RETURNED	OR	DATE RETURNED TO CHIEF ELECTORAL OFFICE
		TOTAL	A		

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SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Sm-F (99/05)

If form is for Nomination Contestant, please tick

NAME OF FUNDRAISING ENTITY: YOUR POLITICAL PARTY OF BC

Number of fundraising functions held

Total gross fundraising function income (sum of boxes K on all S-F) A

Total cost of fundraising functions (sum of boxes L on all S-F) B

Total net income (or loss) from fundraising functions (A - B) C

Total amount of gross income reported as political contributions (sum of boxes F on all S-F) D

Total amount of gross income NOT reported as political contributions (sum of boxes J on all S-F) E

(Boxes D + E must equal box A)

For election financing reports only (see instructions before completing this section)

~~Total cost of fundraising functions held during the campaign period, which did not incur net losses F~~

~~Total cost of fundraising functions held outside the campaign period G~~

~~Total net losses of fundraising functions which incurred net losses during the campaign period H~~



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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

PAGE
OF

NAME OF FILING ENTITY	YOUR POLITICAL PARTY OF BC	
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY)	

Gross income reported as political contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick If Charge per Ticket Varies
Purchases by organizations	<input type="text"/>	<input type="text"/>	<input type="text"/> A	<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets	<input type="text"/>	<input type="text"/>	<input type="text"/> B	<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each	<input type="text"/>	<input type="text"/>	<input type="text"/> C	<input type="checkbox"/>

Other gross income reported as contributions, including anonymous contributions (provide full details)

<input type="text"/>	<input type="text"/>	D
<input type="text"/>	<input type="text"/>	E

Total gross income reported as political contributions (A + B + C + D + E) F

Gross income not reported as political contributions

	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	<input type="text"/>	<input type="text"/>	<input type="text"/> G	<input type="checkbox"/>

Other gross income not reported as contributions (provide full details)

<input type="text"/>	<input type="text"/>	H
<input type="text"/>	<input type="text"/>	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

PAGE	OF	G	REVENUE/CONTRIBUTION (A-F)	H	I	J	K	L	M	N	O	P
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LOANS AND GUARANTEES RECEIVED

NAME OF FILING ENTITY

YOUR POLITICAL PARTY OF BC

DATE RECEIVED	FULL NAMES OF LENDER AND GUARANTOR	CLASS* (1)						CONDITIONS (if applicable)	ORIGINAL AMOUNT OF LOAN / GUARANTEE \$	AMOUNT OF LOAN OUTSTANDING \$	INT. RATE %	PRIME RATE %	AMOUNT OF INTEREST PAYABLE AT PRIME RATE \$	AMOUNT OF INTEREST BEING CHARGED \$
		1	2	3	4	5	6							

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

TOTAL **D** **E** **TOTAL**

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LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2 (99/06)

NAME OF FILING ENTITY YOUR POLITICAL PARTY OF BC

PAGE
OF

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			
TOTALS								A	B	

*CLASS OF CONTRIBUTOR:
 1 - INDIVIDUAL, 2 - CORPORATION, 3 - UNINCORPORATED BUSINESS/COMMERCIAL ORGANIZATION,
 4 - TRADE UNION, 5 - NOT-FOR-PROFIT ORGANIZATION, 6 - OTHER

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TRANSFERS RECEIVED

S-T-Rev (99/06)

NAME OF FILING ENTITY YOUR POLITICAL PARTY OF BC

PAGE
 OF

DATE OF TRANSFER	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER

None

TOTAL **A**

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TRANSFERS GIVEN

S-T-Giv (99/06)

NAME OF FILING ENTITY

YOUR POLITICAL PARTY OF BC

PAGE

OF

DATE OF TRANSFER	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
None		
TOTAL		A