



**ELECTIONS BC**  
A non-partisan Office of the Legislature

# ELECTION FINANCING REPORT

## POLITICAL PARTY

F-P (06/09)

PLEASE PRINT IN BLOCK LETTERS

Amendment # \_\_\_\_\_

|  |                               |  |            |
|--|-------------------------------|--|------------|
| REGISTERED POLITICAL PARTY<br><b>PEOPLE'S FRONT</b>                    |                               | GENERAL VOTING DAY (YYYY / MM / DD)<br><b>2009 / 05 / 12</b> |            |
| FINANCIAL AGENT'S LAST NAME<br><b>SPROULE</b>                          | FIRST NAME<br><b>BRIAN</b>    | MIDDLE NAME(S)<br><b>K</b>                                   |            |
| FINANCIAL AGENT'S MAILING ADDRESS<br><b>18-3370 DEWDNEY TRUNK ROAD</b> |                               |  |            |
| CITY / TOWN<br><b>PORT MOODY</b>                                       | POSTAL CODE<br><b>V3H 2E3</b> | PHONE NUMBER<br><b>604-949-0777</b>                          | FAX NUMBER |
| EMAIL ADDRESS<br><b>briansproule@shaw.ca</b>                           |                               |  |            |

This financing report includes the following forms:

|   |              | FORMS<br>CHECKLIST                  |
|---|--------------|-------------------------------------|
| Statement of Election Income and Expenses –                         | Form St&E-E  | <input checked="" type="checkbox"/> |
| Summary of Expenses –   | Form Sm-E    | <input checked="" type="checkbox"/> |
| Summary of Political Contributions by Class –                       | Form Sm-C    | <input checked="" type="checkbox"/> |
| Political Contributions of Money / Property / Services over \$250 – | Form S-A1    | <input checked="" type="checkbox"/> |
| Permitted Anonymous Contributions Accepted at Functions –           | Form S-A2    | <input checked="" type="checkbox"/> |
| Prohibited Contributions –  | Form S-Ax    | <input checked="" type="checkbox"/> |
| Summary of Fundraising Functions –                                  | Form Sm-F    | <input checked="" type="checkbox"/> |
| Fundraising Function –  | Form S-F     | <input checked="" type="checkbox"/> |
| Loans and Guarantees –  | Form S-L1    | <input checked="" type="checkbox"/> |
| Loans / Debts Forgiven / Written Off –                              | Form S-L2    | <input checked="" type="checkbox"/> |
| Transfers Received –  | Form S-T-Rcv | <input checked="" type="checkbox"/> |
| Transfers Given –   | Form S-T-Giv | <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<br> | DATE (YYYY / MM / DD)<br><b>2009 / 06 / 06</b> |
|----------------------------------|--|

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



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# STATEMENT OF ELECTION INCOME AND EXPENSES

5-1&E-2 (08/09)

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GENERAL VOTING DAY (YYYY / MM / DD)

2009/05/12

NAME OF FILING ENTITY  
**PEOPLE'S FRONT**

Total value of political contributions from all sources (from box E on form Sm-C) **NIL**

Total transfers received (from box A on form S-T-Rcv) **NIL**

Interest income **NIL**

Total gross fundraising function income not reported as political contributions  
(from box E on form Sm-F) **NIL**

Other income (describe) **NIL**

**Total Income** (sum of above boxes) **NIL** **A**

Total value of election expenses subject to limits during 60-day pre-campaign period  
(from box A on form Sm-E) **NIL**

Total value of election expenses subject to limits during campaign period  
(from box B on form Sm-E) **NIL**

Total value of election expenses not subject to limits (from box C on form Sm-E) **NIL**

Total other expenses (from box D on form Sm-E) **NIL**

Total transfers given (from box A on form S-T-Giv) **NIL**

**Total Expenditures** (sum of above boxes) **NIL** **B**

**Surplus (Deficit)** (box A - box B) **NIL** **C**

**For Candidates Only**

Balance in campaign account as of date of report **NIL** **D**



# SUMMARY OF EXPENSES

Sm-E (08/09)

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NAME OF FILING ENTITY

PEOPLE'S FRONT

| Election Expenses   | 60-day<br>Pre-campaign<br>Period Election<br>Expenses Subject<br>to Limits | Campaign Period<br>Election Expenses<br>Subject to Limits | Election Expenses<br>Not Subject to<br>Limits | Non-election<br>Expenses Used<br>Outside 60-day<br>Pre-campaign and<br>Campaign Periods |
|---|--|---|---|---|
| Accounting and audit services   |  |   |   |   |
| Bank charges  |  |   |   |   |
| Candidate's nomination deposit  |  |   |   |   |
| Donations and gifts   |  |   |   |   |
| Convention, workshop and meeting fees and rentals   |  |   |   |   |
| Data processing / Information technology  |  |   |   |   |
| Excess nomination expenses (from box F, form Sm-E-NC)   |  |   |   |   |
| Furniture and equipment   |  |   |   |   |
| Insurance   |  |   |   |   |
| Interest expense  |  |   |   |   |
| Media advertising   |  |   |   |   |
| Newsletters and promotional material (signs, brochures, etc.)   |  |   |   |   |
| Office rent, utilities and maintenance  |  |   |   |   |
| Office supplies, stationery   |  |   |   |   |
| Personal expenses of candidate (from box G, form Sm-PE1)  |  |   |   |   |
| Postage and courier   |  |   |   |   |
| Professional services   |  |   |   |   |
| Research and polling  |  |   |   |   |
| Salaries and benefits   |  |   |   |   |
| Social functions / thank-you parties  |  |   |   |   |
| Telecommunications  |  |   |   |   |
| Travel  |  |   |   |   |
| Total cost of fundraising functions held during the 60-day pre-campaign period and the campaign period which did not incur net losses (from box H, form Sm-F) |  |   |   |   |
| Total cost of fundraising functions held outside the 60-day pre-campaign period and the campaign period (from box I, form Sm-F)                               |  |   |   |   |
| Total net losses of fundraising functions which incurred net losses during the campaign period (from box J, form Sm-F)  |  |   |   |   |
| Other expenses (describe)   |  |   |   |   |
| <b>Total Expenses</b>   | NIL A  | NIL B   | NIL C   | NIL D   |



# SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (08/11)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

**PEOPLE'S FRONT**

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

|  | Contributions greater than \$250 |    | Contributions of \$250 or less |    |
|--|----------------------------------|----|--------------------------------|----|
| Individuals  |                                  | 1a |                                | 1b |
| Corporations                                       |                                  | 2a |                                | 2b |
| Unincorporated Business / Commercial Organizations |                                  | 3a |                                | 3b |
| Trade Unions                                       |                                  | 4a |                                | 4b |
| Non-profit Organizations                           |                                  | 5a |                                | 5b |
| Other Identifiable Contributions                   |                                  | 6a |                                | 6b |

|   |  |   |  |   |
|---|--|---|--|---|
| Classified subtotals (1a to 6a & 1b to 6b)<br>(box A = box A, S-A1) |  | A |  | B |
|---|--|---|--|---|

|                              |  |   |
|------------------------------|--|---|
| Classified totals<br>(A + B) |  | C |
|------------------------------|--|---|

|   |  |   |
|---|--|---|
| Total anonymous contributions<br>(from box A, S-A2) |  | D |
|---|--|---|

|  |  |   |
|--|--|---|
| Total value of all political contributions from all sources<br>(C + D) |  | E |
|--|--|---|

|                              |  |   |
|------------------------------|--|---|
| Total contributions of money |  | F |
|------------------------------|--|---|

|  |  |   |
|--|--|---|
| Total contributions of goods, services and discounts<br>(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 |
|---|--|---|

|  |    |   |
|--|----|---|
| Total dollar amount of all income tax receipts issued for political contributions received<br>(Leadership Contestants cannot issue tax receipts) | \$ | I |
|--|----|---|









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## SUMMARY OF FUNDRAISING FUNCTIONS

Sm-F (08/09)

(Total amounts from all forms S-F)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

**PEOPLE'S FRONT**

Number of fundraising functions held

**NIL**

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

**A**

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

**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 forms)

**D**

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

**E**

(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, which did not incur net losses

**F**

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

**G**

Total cost of fundraising functions held during the 60 day pre-campaign period and the  
campaign period, which did not incur net losses (F + G)

**H**

Total cost of fundraising functions held outside the 60 day  
pre-campaign period and the campaign period

**I**

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

**J**





# FUNDRAISING FUNCTION

S-F (99/06)

(Submit a separate form for each function held)

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If form is for Nomination Contestant, please tick

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OF

|  |  |
|--|--|
| NAME OF FILING ENTITY<br><b>PEOPLE'S FRONT</b> |  |
| 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                                       |                        |                   | A                       | <input type="checkbox"/>         |
| Purchases by individuals of more than \$250 worth of tickets     |                        |                   | B                       | <input type="checkbox"/>         |
| Purchases by individuals of tickets that are more than \$50 each |                        |                   | C                       | <input type="checkbox"/>         |

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

|  |   |                          |
|--|---|--------------------------|
|  | D | <input type="checkbox"/> |
|  | E | <input type="checkbox"/> |

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

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

|  |   |                          |
|--|---|--------------------------|
|  | H | <input type="checkbox"/> |
|  | I | <input type="checkbox"/> |

Total gross income not reported as political contributions (G + H + I)  J

Total gross income (box F + J)  K

Total cost of function  L

Net Income (loss) (box K - L)  M



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# LOANS AND GUARANTEES

S-11 (08/09)

PLEASE PRINT IN BLOCK LETTERS

NAME OF FILING ENTITY  
**PEOPLE'S FRONT**

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| DATE RECEIVED (YYYY/MM/DD) | FULL NAMES OF LENDER AND/OR GUARANTOR | CLASS (K) |   |   |   |   |   | CONDITIONS (if applicable) | DUE DATE (YYYY/MM/DD) | ORIGINAL AMOUNT OF LOAN/GUARANTEE \$ | AMOUNT OF LOAN OUTSTANDING \$ | INT. RATE % | PRIME RATE % | A   | B                                   | C                                |
|----------------------------|---------------------------------------|-----------|---|---|---|---|---|----------------------------|-----------------------|--------------------------------------|-------------------------------|-------------|--------------|---|-------------------------------------|----------------------------------|
|                            |                                       | 1         | 2 | 3 | 4 | 5 | 6 |                            |                       |                                      |                               |             |              | AMOUNT OF INTEREST PAYABLE AT PRIME RATE \$ | AMOUNT OF INTEREST BEING CHARGED \$ | BENEFIT/ CONTRIBUTION (A - B) \$ |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
|                            |                                       |           |   |   |   |   |   |                            |                       |                                      |                               |             |              |   |                                     |                                  |
| <b>TOTAL</b>               |                                       |           |   |   |   |   |   |                            | <b>D</b>              | <b>E</b>                             | <b>TOTAL</b>                  |             |              |   |                                     | <b>F</b>                         |

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

ORIGINAL - CHIEF ELECTORAL OFFICE  
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# TRANSFERS GIVEN

S-T-Glv (99/06)

NAME OF FILING ENTITY  
**PEOPLE'S FRONT**

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| DATE OF TRANSFER | NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES | VALUE OF TRANSFER |
|------------------|---|-------------------|
|                  |   |                   |
|                  |   |                   |
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|                  |   |                   |
|                  |   |                   |
|                  |   |                   |
| TOTAL            |   | A                 |

ORIGINAL — CHIEF ELECTORAL OFFICE  
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