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ELECTIONS
A non-partisan Office of the Legislature

ANNUAL FINANCIAL REPORT POLITICAL PARTY

F-P(A) (08/09)

PLEASE PRINT IN BLOCK LETTERS

For Period 2011/01/01 to 2012/12/31 Amendment # _____
YYYY/MM/DD YYYY/MM/DD

REGISTERED POLITICAL PARTY <u>work less party</u>			
FINANCIAL AGENT'S LAST NAME <u>Schmidt</u>		FIRST NAME <u>[Signature]</u>	MIDDLE NAME(S)
FINANCIAL AGENT'S MAILING ADDRESS <u>229 2118 Gravelly St</u>			
CITY/TOWN <u>Vancouver</u>	POSTAL CODE <u>V5L 1B9</u>	PHONE NUMBER <u>604 346 1318</u>	FAX NUMBER
EMAIL ADDRESS <u>coordinator@worklessparty.org</u>			

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"/>
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"/>
Combined Contributions to Political Party, Constituency Association, etc. -	Form S-A1-A	<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-Rev	<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

[Signature]

DATE (YYYY / MM / DD)

2012/03/31

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

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STATEMENT OF ASSETS AND LIABILITIES

SI-A&L (03/01)

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AS OF DATE (YYYY/MM/DD)

2011/12/31

NAME OF FILING ENTITY

Work Less Party

Current Assets

Cash on hand	776.60
Cash on deposit	10 774.20
Accounts receivable	/
Bonds, stocks, other investments	60.30
Inventory	0

Other (describe)

Total Current Assets **11 615.90**

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 ~~11 615.90~~

Total Assets **11 615.90** A

Current Liabilities

Accounts payable	/
Wages, salaries payable	/
Loans payable	/

Other (describe)

Total Current Liabilities /

Long-term Liabilities

Loans payable /

Other (describe)

Total Long-term Liabilities /

Total Liabilities / B

Accumulated Surplus (Deficit) (A - B) **11 615.90** C



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STATEMENT OF INCOME AND EXPENSES

SI-1&E (11/05)

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NAME OF FILING ENTITY

work less party

Income:

Total political contributions (box E, form Sm-C)	0
Gross fundraising income not reported as political contributions (box E, form Sm-F)	29901
Total transfers received (box A, form S-T-Rcv)	
Interest / investment income	8.26
Product sales	177.45
Advertising income	/
Rental income	/
Other income (describe)	/

Total Income 30 086.71 A

Expenses:



Accounting and audit services	
Amortization expense	
Bad debt expense	
Bank charges	1.13
Convention, workshop and meeting fees and rentals	2166
Data processing / information technology	
Donations and gifts	
Furniture and equipment	
Insurance	/
Interest expense	/
Media advertising	
Newsletters and promotional materials (signs, brochures, etc.)	979.38
Office rent, utilities and maintenance	
Office supplies, stationery	
Postage and courier	
Professional services	
Research and polling	
Salaries and benefits	1924.54
Social functions/thank-you parties	
Subscriptions and dues	
Telecommunications	
Travel	
Total cost of fundraising functions (box B, form Sm-F)	18 527.60
Total transfers given (box A, form S-T-Giv)	

Other expenses (describe)

Checks From 2010 not include in preo year 250

Total Expenses 23 848.65 B

Period Surplus (Deficit) (A - B) 6 238.06 C



SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (06/11)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

Work Less Party

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)
(box A = box A, S-A1)

<i>0</i>	A	<i>0</i>	B
----------	---	----------	---

Classified totals
(A + B)

	C
--	---

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

	D
--	---

Total value of all political contributions from all sources
(C + D)

<i>0</i>	E
----------	---

Total contributions of money

	F
--	---

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

<i>0</i>	H
----------	---

Total dollar amount of all income tax receipts issued for political contributions received
(Leadership Contestants cannot issue tax receipts)

\$ <i>0</i>	I
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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
work less Party

PAGE *1*
OF *1*

FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated organization, include full names of two directors)	CLASS OF CONTRIBUTOR* (X APPROPRIATE CLASS)						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION (YYYY/MM/DD)	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			
TOTAL OF INDIVIDUAL CONTRIBUTIONS						A	○		

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

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PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2 : (99/)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
work less Party

PAGE
OF

DATE OF FUNCTION	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
TOTAL			A <i>9</i>

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Apr. 01 2012 05:39PM P1

FROM : ABOVE AVERAGE LINGERIE & FASHI PHONE NO. : 604 988 0425



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COMBINED CONTRIBUTIONS TO POLITICAL PARTY, CONSTITUENCY ASSOCIATIONS AND CANDIDATES WITH A TOTAL VALUE GREATER THAN \$250

S-A1-A (99/06)

NAME OF FILING ENTITY
Work Less Party

PAGE *1*
OF *1*

FULL NAME OF CONTRIBUTOR (If a numbered corporation or an unincorporated organization, include full names of two directors)	CLASS OF CONTRIBUTOR* (✓ APPROPRIATE CLASS)						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	1	2	3	4	5	6			

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

TOTAL OF INDIVIDUAL CONTRIBUTIONS A *0*

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SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Sm-F (11/02)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

Work Less Party

Number of fundraising functions held

2

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

29901 A

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

18527.60 B

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

11073.40 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)

29.60 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 and the campaign period

/ F

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

/ H



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

PAGE
OF

NAME OF FILING ENTITY <i>Work Less Party</i>	
DATE OF EVENT (YYYY/MM/DD) <i>2011/03/26</i>	DESCRIPTION OF FUNDRAISING EVENT (IF JOINT EVENT, IDENTIFY OTHER ENTITY) <i>Annual Spring Fundraiser</i>

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="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets				<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each				<input type="checkbox"/>

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

			D
			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	<i>450</i>	<i>15</i>	<i>6750</i>	<input type="checkbox"/>

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

<i>Pop & AC COINC SALES</i>			<i>7169</i>	H
				I

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

<i>13919</i>	J
--------------	---

Total gross income (box F + J)

<i>13919</i>	K
--------------	---

Total cost of function

<i>7053.19</i>	L
----------------	---

Net income (loss) (box K - L)

<i>6865.81</i>	M
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FUNDRAISING FUNCTION

(Submit a separate form for each function held)

S-F (03/01)

If form is for Nomination Contestant, please tick

PAGE 1
OF 1

NAME OF FILING ENTITY Work Less Party				
DATE OF EVENT (YYYY/MM/DD) 2011/10/15		DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY) Work Less Party annual fall fundraiser		
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="checkbox"/>
<input type="text"/>			<input type="text"/>	E <input type="checkbox"/>
Total gross income reported as political contributions (A + B + C + D + E)				<input type="text"/> F <input type="checkbox"/>
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" value="500"/>	<input type="text" value="15"/>	<input type="text" value="7500"/>	G <input type="checkbox"/>
Other gross income not reported as contributions (provide full details)				
<input type="text" value="ALCOHOL x pop"/>			<input type="text" value="8482"/>	H <input type="checkbox"/>
<input type="text"/>			<input type="text"/>	I <input type="checkbox"/>
Total gross income not reported as political contributions (G + H + I)				<input type="text" value="15982"/> J <input type="checkbox"/>
Total gross income (F + J)				<input type="text" value="15982"/> K <input type="checkbox"/>
Total cost of function				<input type="text" value="114764"/> L <input type="checkbox"/>
Net income (loss) (box K-L)				<input type="text" value="4507.59"/> M <input type="checkbox"/>



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LOANS AND GUARANTEES

S-L1 (08/09)

PLEASE PRINT IN BLOCK LETTERS

NAME OF FILING ENTITY
Work Less Party

PAGE 1
OF 1

DATE RECEIVED (YYYY/MM/DD)	FULL NAMES OF LENDER AND/OR GUARANTOR	CLASS* (X)						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) \$	
TOTAL										D	<u>0</u>	E	<u>0</u>	TOTAL		F	<u>0</u>

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

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LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2 (99/06)

NAME OF FILING ENTITY
Work Less Party

PAGE 1
OF 1

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	<i>0</i>	B	<i>0</i>

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

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Apr. 01 2012 05:43PM P9

FROM : ABOVE AVERAGE LINGERIE & FASHI PHONE NO. : 604 988 0425



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TRANSFERS GIVEN

S-T-Giv (99/06)

NAME OF FILING ENTITY
Work Less Party

PAGE *7*
OF *7*

DATE OF TRANSFER	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
	<i>NA</i>	
TOTAL		<i>A</i>

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