



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

**ANNUAL FINANCIAL REPORT  
CONSTITUENCY ASSOCIATION**

F-GA(A) (08/09)

PLEASE PRINT IN BLOCK LETTERS

For Period 2008/08/25 to 2009/12/31 Amendment # \_\_\_\_\_  
YYYY/MM/DD YYYY/MM/DD

REGISTERED CONSTITUENCY ASSOCIATION <b>ABBOTSFORD SOUTH</b>			
REGISTERED POLITICAL PARTY / INDEPENDENT MLA <b>NEW DEMOCRATIC PARTY OF BC</b>			
FINANCIAL AGENT'S LAST NAME <b>HERBERT</b>		FIRST NAME <b>Bruce</b>	MIDDLE NAME(S) <b>R</b>
FINANCIAL AGENT'S MAILING ADDRESS <b>P.O. Box 2223</b>			
CITY/TOWN <b>ABBOTSFORD</b>	POSTAL CODE <b>V2T 1X8</b>	PHONE NUMBER <b>604 857 3577</b>	FAX NUMBER _____
EMAIL ADDRESS <b>bruceherbert@shaw.ca</b>			

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 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

*[Signature]*

DATE (YYYY / MM / DD)

2009/02/04

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



# STATEMENT OF ASSETS AND LIABILITIES

SI-A&L (03/01)

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AS OF DATE (YYYY / MM / DD)

2008/12/31

NAME OF REPORTING ENTITY

ABDUS FALD South NDP

### Current Assets

Cash on hand

Cash on deposit

Accounts receivable

Bonds, stocks, other investments

Inventory

Other (describe)

Total Current Assets

1182.51

### 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

1182.51 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)

1182.51 C



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# STATEMENT OF INCOME AND EXPENSES

St-1&E (08/09)

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NAME OF FILING ENTITY  
**ABERTS FORD South NDP**

<b>Income:</b>	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)	2506.37
	Interest income	50
	Product sales	
	Advertising income	
	Rental income	
Other income (describe)		

**Total Income** 2566.87 **A**

<b>Expenses:</b>	Accounting and audit services	
	Amortization expense	
	Bad debt expense	
	Bank charges	
	Donations and gifts	
	Convention, workshop and meeting fees and rentals	
	Data processing / information technology	
	Furniture and equipment	
	Insurance	
	Interest expense	
	Media advertising	
	Newsletters and promotional materials (signs, brochures, etc.)	
	Office rent, utilities and maintenance	
	Office supplies, stationery	52.46
	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)	1331.92	
Other expenses (describe)		

**Total Expenses** 1384.38 **B**

**Period Surplus (Deficit) (A - B)** 1182.51 **C**



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# SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C (06/11)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY  
**ABBOTSFORD South NDP**

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 Contributors		6a		6b
<b>Classified subtotals (1a to 6a &amp; 1b to 6b) (box A = box A, S-A1)</b>		<b>A</b>		<b>B</b>
<b>Classified totals (A + B)</b>				<b>C</b>
<b>Total anonymous contributions (from box A, S-A2)</b>				<b>D</b>
<b>Total value of all political contributions from all sources (C + D)</b>				<b>E</b>

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  **H**

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



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

If form is for Nomination Contestant, please tick

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NAME OF FILING ENTITY  
**ABBOTSFORD SOUTH NDP**

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FULL NAME OF CONTRIBUTOR <small>(If a charitable corporation or an unincorporated organization, include full names of two directors)</small>	CLASS OF CONTRIBUTOR* <small>(Of appropriate class)</small>						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION <small>(mm/dd/yy)</small>	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**



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# PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2 (B9/06)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

ABBOTSFORD SOUTH NDP

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DATE OF FUNCTION	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
<i>(The main body of the table is crossed out with a diagonal line.)</i>			
			<b>TOTAL</b>
			<b>A</b>

**PROHIBITED CONTRIBUTIONS**



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NAME OF FILING ENTITY

ABBOTSFORD SOUTH NDP

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

ORIGINAL - CHIEF ELECTORAL OFFICE  
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# SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Srs-F (08/09)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

ABBOTSFORD South NDP

Number of fundraising functions held

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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NAME OF FILING ENTITY <b>ABDOTT FORD SOUTH NDD</b>	
DATE OF EVENT (YYYYMMDD)	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="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)

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

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

			<input type="checkbox"/>
			<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**



# LOANS AND GUARANTEES

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NAME OF FILING ENTITY  
**ABBOTSFORD SOUTH NDP**

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DATE RECEIVED (YYYY/MM/DD)	FULL NAME 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	E						TOTAL	F	

\* 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: ABBOYS FORD SOUTH NDP

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DATE RECEIVED	FULL NAME OF LENDER / CREDITOR	CLASS OF CONTRIBUTOR* (✓ APPROPRIATE CLASS)						CONDITIONS (If applicable)	AMOUNT OF LOAN / DEBT 6	AMOUNT OF LOAN / DEBT FORGIVEN / WRITTEN OFF 5
		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 - NON-PROFIT ORGANIZATION, 6 - OTHER

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# TRANSFERS RECEIVED

S-T-Rcv (99/06)

NAME OF FILING ENTITY  
**ABBOTSFORD SOUTH NDP**

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DATE OF TRANSFER	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
15 Jul 08	ABBOTSFORD MT. LEHMAN NDP	2566.39
<b>TOTAL</b>		<b>A 2566.39</b>

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**TRANSFERS GIVEN**

S-T-Giv (09/06)

NAME OF FILING ENTITY  
**ABBOTSFORD SOUTH NDP**

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DATE OF TRANSFER	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
19 Nov 08	ABBOTSFORD WEST NDP	<del>2566.39</del> 1331.92
TOTAL		A 1331.92

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