



ELECTION FINANCING REPORT

CANDIDATE

F-C
(15/09)

ELECTIONS
A non-partisan Office of the Legislature

Amendment # _____

| | | | |
|---|------------------------------|------------------------|-------------------------------------|
| CANDIDATE'S LAST NAME BAL | | FIRST NAME BALPREET | MIDDLE NAME(S) SINGH |
| ELECTORAL DISTRICT SURREY-NEWTON | POLITICAL PARTY/AFFILIATION | | GENERAL VOTING DAY (YYYY / MM / DD) |
| FINANCIAL AGENT'S LAST NAME BAL | | FIRST NAME BALPREET | MIDDLE NAME(S) SINGH |
| FINANCIAL AGENT'S MAILING ADDRESS 6321 130B STREET | | | CITY / TOWN SURREY |
| POSTAL CODE V3X1R1 | PHONE NUMBER 604-505-1100 | FAX NUMBER | EMAIL ADDRESS BAL@BAL.ORG |

This financing report includes the following forms:

All Candidates:

| | | FORMS CHECKLIST |
|---|-------------------------------------|-------------------------------------|
| Statement of Election Income and Expenses – Form St-I&E-E | <input checked="" type="checkbox"/> | X |
| Summary of Expenses – Form Sm-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"/> |
| Prohibited Contributions – Form S-Ax | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Personal Expenses Paid by Financial Agent – Form Sm-PE1 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Personal Expenses Paid by Candidate – Form Sm-PE2 | <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 – 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-Rcv | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Transfers Given – Form S-T-Giv | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

Candidates Who Were Nomination Contestants:

| | | |
|---|--------------------------|--------------------------|
| Nomination Contestant Expenses – Form Sm-E-NC | <input type="checkbox"/> | <input type="checkbox"/> |
| Summary of Political Contributions by Class – Form Sm-C | <input type="checkbox"/> | <input type="checkbox"/> |
| Political Contributions of Money / Property / Services over \$250 – Form S-A1 | <input type="checkbox"/> | <input type="checkbox"/> |
| Permitted Anonymous Contributions Accepted at Functions – Form S-A2 | <input type="checkbox"/> | <input type="checkbox"/> |
| Personal Expenses Paid by Financial Agent – Form Sm-PE1 | <input type="checkbox"/> | <input type="checkbox"/> |
| Personal Expenses Paid by Contestant – Form Sm-PE2 | <input type="checkbox"/> | <input type="checkbox"/> |
| Summary of Fundraising Functions – Form Sm-F | <input type="checkbox"/> | <input type="checkbox"/> |
| Fundraising Function – Form S-F | <input type="checkbox"/> | <input type="checkbox"/> |

I, the Financial Agent, declare that:

- (a) I am authorized to act on behalf of the above-named candidate;
- (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

Balpreet S. Bal

DATE (YYYY / MM / DD)

2017/08/04

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

All forms included in this report are available for public inspection.

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PLEASE KEEP A COPY FOR YOUR RECORDS

Elections BC 1-800-661-8683 privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6



ELECTIONS
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STATEMENT OF ELECTION INCOME AND EXPENSES

St-I&E-E
(15/07)

GENERAL VOTING DAY (YYYY / MM / DD)
2017/05/09

NAME OF FILING ENTITY
BALPREET BAL

| | |
|---|-------|
| Total value of political contributions from all sources (from box E on form Sm-C) | 6,500 |
| Total transfers received (from box A on form S-T-Rcv) | 0 |
| Interest Income | 0 |
| Total gross fundraising function income not reported as political contributions (from box E on form Sm-F) | 0 |
| Candidate's nomination deposit refund | 0 |

Other Income (describe)

Total Income (sum of above boxes) 6,500 **A**

| | |
|--|----------|
| Total value of election expenses subject to limits (from box A on form Sm-E) | 8,768.20 |
| Total value of election expenses not subject to limits (from box B on form Sm-E) | 0 |
| Total value of other expenses (from box C on form Sm-E) | 0 |
| Total transfers given (from box A on form S-T-Giv) | 0 |

Total Expenditures (sum of above boxes) 8,768.20 **B**

For Candidates Only

Balance in campaign account as of date of report 0 **C**



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SUMMARY OF EXPENSES

Sm-E
(15/08)

| NAME OF FILING ENTITY BALPREET BAL | | | |
|--|-------------------------------------|---|----------------|
| Election Expenses | Election Expenses Subject to Limits | Election Expenses Not Subject to Limits | Other Expenses |
| Accounting and audit services | | | |
| Bank charges | | | |
| Candidate's nomination deposit | | | |
| Convention, workshop and meeting fees and rentals | | | |
| Data processing / information technology | | | |
| Donations and gifts | | | |
| Excess nomination expenses (from box D, form Sm-E-NC) | | | |
| Furniture and equipment | | | |
| Insurance | | | |
| Interest expense | | | |
| Media advertising | 3,364.20 | | |
| Newspapers and promotional material (signs, brochures, etc.) | 5,404.00 | | |
| 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 campaign period (from box F, form Sm-F) | | | |
| Total cost of fundraising functions held outside the campaign period (from box G, form Sm-F) | | | |
| Total net losses of fundraising functions which incurred net losses during the campaign period (from box H, form Sm-F) | | | |
| Other expenses (describe) N/A | 0.00 | | |
| Total Expenses | 8,768.20 | A | B |
| | | | C |

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SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C
(15/07)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
BALPREET BAL

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

| | Contributions greater than \$250 | | Contributions of \$250 or less | |
|--|-------------------------------------|----|-----------------------------------|----|
| Individuals | 1,000 | 1a | | 1b |
| Corporations | 5,500 | 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) 6,500 A 0 B

Classified totals
(A + B) 6,500 C

Total anonymous contributions
(from box A, S-A2) 0 D

Total value of all political contributions from all sources
(C + D) 6,500 E

Total contributions of money 6,500 F

Total contributions of goods, services and discounts
(includes contributions through loans and debts) 0 G
(boxes F + G must equal box E)

Number of contributors who made contributions
of \$250 or less in total value 0 H

Total dollar amount of all income tax receipts issued
(Leadership Contestants cannot issue tax receipts) \$ 6,500 I

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ELECTIONS

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

S-A1
(15/06)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY
BALPREET BAL

PAGE
OF

| 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 | | | |
| NISHAN DEVELOPMENT LTD | | X | | | | | 1,000 | 2017/04/27 | 1,000 |
| WHITE DEVELOPMENT LTD | | X | | | | | 1,000 | 2017/04/27 | 1,000 |
| CRYSTAL HOMES INC. | | X | | | | | 1,000 | 2017/04/27 | 1,000 |
| APNA DRYWALL AND CONSTRUCTION LTD | | X | | | | | 1,000 | 2017/04/27 | 1,000 |
| MISHIANA FINANCE CORP | | X | | | | | 1,500 | 2017/05/04 | 1,500 |
| BIKKAR & JASPAL SRAW | X | | | | | | 1,000 | 2017/04/30 | 1,000 |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

* 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 | 6,500 |
|-----------------------------------|---|-------|

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PERMITTED ANONYMOUS CONTRIBUTIONS ACCEPTED AT FUNCTIONS

S-A2
(15/06)

If form is for Nomination Contestant, please tick

| |
|---------------------------------------|
| NAME OF FILING ENTITY BALPREET BAL |
|---------------------------------------|

| | |
|------|---|
| PAGE | 1 |
| OF | 1 |

| DATE OF FUNCTION (YYYY/MM/DD) | DESCRIPTION OF FUNCTION | NUMBER OF PEOPLE ATTENDING | TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS |
|----------------------------------|-------------------------|----------------------------|---|
| | N/A | | |
| | | | |
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| TOTAL | | | A 0.00 |

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Elections BC 1-800-681-8883 privacy@elections.bc.ca or PO Box 9275 Stn Prov Govt, Victoria BC V8W 9J6



ELECTIONS

A non-partisan Office of the Legislature

PROHIBITED CONTRIBUTIONS

S-Ax
(15/09)

NAME OF FILING ENTITY
BALPREET BAL

PAGE 1
OF 1

| DATE RECEIVED (YYYY/MM/DD) | CIRCUMSTANCES | AMOUNT | DATE RETURNED (YYYY/MM/DD) | OR | DATE REMITTED TO CHIEF ELECTORAL OFFICE (YYYY/MM/DD) |
|-------------------------------|---------------|----------|-------------------------------|----|---|
| | N/A | | | | |
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| TOTAL | | A | 0.00 | | |

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**PERSONAL EXPENSES PAID
BY FINANCIAL AGENT**
(Personal expenses of candidate or contestant
which were paid by the financial agent)

Sm-PE1
(15/06)

If form is for Nomination Contest, please tick

NAME OF FILING ENTITY
BALPREET BAL

Paid by the Financial Agent

| | | | | |
|--|--|-----------------------|---|---|
| A. Transportation to, from or within electoral district | | Air travel | 0 | |
| | | Bus, taxi | 0 | |
| | | Rental vehicle | 0 | |
| | | Private vehicle | 0 | |
| Other (describe) | | | 0 | |
| Total | | | 0 | A |
| | | | | |
| B. Cost of lodging, meals and incidental expenses while travelling | | Hotel, motel | 0 | |
| | | Meals | 0 | |
| Incidental expenses (describe) | | | 0 | |
| Total | | | 0 | B |
| | | | | |
| C. Cost of renting a necessary temporary residence | | Rent | 0 | C |
| | | | | |
| D. All other necessary personal expenses related to campaign or contest | | Family care | 0 | |
| | | Disability expenses | 0 | |
| Total | | | 0 | D |
| | | | | |
| E. Total personal expenses paid by the financial agent | | Total of items A to D | 0 | E |
| | | | | |
| F. Total personal expenses paid out of pocket by candidate or contestant | | From Sm-PE2, box E | 0 | F |
| | | | | |
| G. Total personal expenses from Sm-PE1 and Sm-PE2 | | Total of items E + F | 0 | G |



PERSONAL EXPENSES PAID BY CANDIDATE / CONTESTANT

Sm-PE2
(15/06)

(This form must be completed by the candidate or contestant
and submitted to the financial agent within 60 days)

If form is for Nomination Contest, please tick

| | | | | | | | | | | | | | | | | | | | |
|---|--|-----------------------|---|--|---------------------|----------|----------|--------------------------------|----------|----------|-----------------|----------|----------|------------------|---|--|--------------|----------|----------|
| NAME OF FILING ENTITY BALPREET BAL | | | | | | | | | | | | | | | | | | | |
| Paid by the Candidate or Contestant | | | | | | | | | | | | | | | | | | | |
| A. Transportation to, from or within electoral district | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Air travel</td> <td style="width: 10%; text-align: center; padding: 2px;">0</td> <td style="width: 30%;"></td> </tr> <tr> <td style="padding: 2px;">Bus, taxi</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="padding: 2px;">Rental vehicle</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="padding: 2px;">Private vehicle</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="padding: 2px;">Other (describe)</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">A</td> </tr> </table> | Air travel | 0 | | Bus, taxi | 0 | | Rental vehicle | 0 | | Private vehicle | 0 | | Other (describe) | 0 | | Total | 0 | A |
| Air travel | 0 | | | | | | | | | | | | | | | | | | |
| Bus, taxi | 0 | | | | | | | | | | | | | | | | | | |
| Rental vehicle | 0 | | | | | | | | | | | | | | | | | | |
| Private vehicle | 0 | | | | | | | | | | | | | | | | | | |
| Other (describe) | 0 | | | | | | | | | | | | | | | | | | |
| Total | 0 | A | | | | | | | | | | | | | | | | | |
| B. Cost of lodging, meals and incidental expenses while travelling | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Hotel, motel</td> <td style="width: 10%; text-align: center; padding: 2px;">0</td> <td style="width: 30%;"></td> </tr> <tr> <td style="padding: 2px;">Meals</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="padding: 2px;">Incidental expenses (describe)</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">B</td> </tr> </table> | Hotel, motel | 0 | | Meals | 0 | | Incidental expenses (describe) | 0 | | Total | 0 | B | | | | | | |
| Hotel, motel | 0 | | | | | | | | | | | | | | | | | | |
| Meals | 0 | | | | | | | | | | | | | | | | | | |
| Incidental expenses (describe) | 0 | | | | | | | | | | | | | | | | | | |
| Total | 0 | B | | | | | | | | | | | | | | | | | |
| C. Cost of renting a necessary temporary residence | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Rent</td> <td style="width: 10%; text-align: center; padding: 2px;">0</td> <td style="width: 30%;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">C</td> </tr> </table> | Rent | 0 | | Total | 0 | C | | | | | | | | | | | | |
| Rent | 0 | | | | | | | | | | | | | | | | | | |
| Total | 0 | C | | | | | | | | | | | | | | | | | |
| D. All other necessary personal expenses related to campaign or contest | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Family care</td> <td style="width: 10%; text-align: center; padding: 2px;">0</td> <td style="width: 30%;"></td> </tr> <tr> <td style="padding: 2px;">Disability expenses</td> <td style="text-align: center; padding: 2px;">0</td> <td></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">D</td> </tr> </table> | Family care | 0 | | Disability expenses | 0 | | Total | 0 | D | | | | | | | | | |
| Family care | 0 | | | | | | | | | | | | | | | | | | |
| Disability expenses | 0 | | | | | | | | | | | | | | | | | | |
| Total | 0 | D | | | | | | | | | | | | | | | | | |
| E. Total personal expenses paid by candidate or contestant | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Total of items A to D</td> <td style="width: 10%; text-align: center; padding: 2px;">0</td> <td style="width: 30%;"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Total</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">E</td> </tr> </table> | Total of items A to D | 0 | | Total | 0 | E | | | | | | | | | | | | |
| Total of items A to D | 0 | | | | | | | | | | | | | | | | | | |
| Total | 0 | E | | | | | | | | | | | | | | | | | |

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SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

Sm-F
(15/07)

If form is for Nomination Contestant, please tick

| | |
|--|-----|
| NAME OF FILING ENTITY BALPREET BAL | |
| Number of fundraising functions held | 0 |
| Total gross fundraising function income (sum of boxes M on all S-F forms) | 0 A |
| Total cost of fundraising functions (sum of boxes N on all S-F forms) | 0 B |
| Total net income (or loss) from fundraising functions (A - B) | 0 C |
| Total amount of gross income reported as political contributions (sum of boxes G on all S-F forms) | |
| | 0 D |
| Total amount of gross income NOT reported as political contributions (sum of boxes L on all S-F forms) | |
| | 0 E |
| <small>(boxes D + E must equal box A)</small> | |
| 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 campaign period | 0 F |
| Total cost of fundraising functions held outside the campaign period | 0 G |
| Total net losses of fundraising functions which incurred net losses during the campaign period | 0 H |



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FUNDRAISING FUNCTION
(Submit a separate form for each function held)

S-F
(15/07)

If form is for Nomination Contestant, please tick

PAGE **1**
OF **1**

| | |
|--|---|
| NAME OF FILING ENTITY BALPREET BAL | |
| DATE OF EVENT (YYYY/MM/DD) | DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY) NO FUNCTIONS |

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 | 0 | 0 | 0 | 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 |
| | E |
| | F |

Total gross income reported as political contributions (A + B + C + D + E + F) 0 **G**

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

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

| | |
|--|---|
| | I |
| | J |
| | K |

| | | |
|--|------|---|
| Total gross income not reported as political contributions (H + I + J + K) | 0.00 | L |
| Total gross income (G + L) | 0.00 | M |
| Total cost of function | 0.00 | N |
| Net income (loss) (box M-N) | 0.00 | O |



ELECTIONS
A non-partisan Office of the Legislature

LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2
(15/09)

| |
|--|
| NAME OF FILING ENTITY BALPREET BAL |
|--|

| |
|---------------|
| PAGE 1 |
| OF 1 |

| DATE FORGIVEN/ WRITTEN OFF (YYYY/MM/DD) | FULL NAME OF LENDER / CREDITOR | CLASS OF CONTRIBUTOR* (X APPROPRIATE CLASS) | | | | | | CONDITIONS (if applicable) | ORIGINAL AMOUNT OF LOAN/DEBT \$ | AMOUNT OF LOAN/DEBT FORGIVEN/WRITTEN OFF \$ | |
|---|--------------------------------|--|---|---|---|---|---|-------------------------------|---------------------------------------|---|------|
| | | 1 | 2 | 3 | 4 | 5 | 6 | | | | |
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| | | | | | | | | | | | |
| TOTALS | | | | | | | | A | 0.00 | B | 0.00 |

* 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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 PLEASE KEEP A COPY FOR YOUR RECORDS.

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 The information will be used to administer provisions under the *Election Act*. Questions can be directed to: **Privacy Officer**,
 Elections BC 1-800-661-8683, privacy@elections.bc.ca or PO Box 9275 Str Prov Govt, Victoria BC V8W 9J6



ELECTIONS

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TRANSFERS RECEIVED

S-T-Rcv
(15/06)

NAME OF FILING ENTITY
BALPREET BAL

PAGE 1

OF 1

| DATE OF TRANSFER (YYYY/MM/DD) | NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES | VALUE OF TRANSFER |
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| TOTAL | A | 0.00 |

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ELECTIONS

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TRANSFERS GIVEN

S-T-Giv
(15/06)

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| PAGE | 1 |
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| DATE OF TRANSFER (YYYY/MM/DD) | NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES | VALUE OF TRANSFER |
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| TOTAL | | A 0.00 |

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ELECTIONS
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CANDIDATE'S NOMINATION CONTESTANT EXPENSES INCURRED DURING THE CAMPAIGN PERIOD

Sm-E-NC
(15/07)

NAME OF FILING ENTITY
BALPREET BAL

Nomination contestant expenses incurred during the campaign period:

| | | |
|---|---|--|
| Convention, workshop and meeting fees and rentals | 0 | |
| Furniture and equipment | 0 | |
| Insurance | 0 | |
| Newsletters and promotional materials (signs, brochures, etc.) | 0 | |
| Office rent, utilities and maintenance | 0 | |
| Office supplies, stationery | 0 | |
| Postage and courier | 0 | |
| Professional services | 0 | |
| Research and polling | 0 | |
| Social functions/thank-you parties | 0 | |
| Telecommunications | 0 | |
| Travel | 0 | |
| Total net losses of nomination contestant fundraising functions which incurred net losses during the campaign period (box H, form Sm-F) | | |
| Other expenses (describe) | 0 | |

Total expenses 0.00 **A**

Candidate's campaign period election expenses limit **B** \times 10% = 0 **C**

Excess nomination contestant expenses (A - C)
(This amount, if greater than zero, is an election expense of the candidate) 0.00 **D**