



ELECTIONS
A non-partisan Office of the Legislature

ELECTION FINANCING REPORT
CONSTITUENCY ASSOCIATION

F-CA
(15/09)

Amendment # _____

REGISTERED CONSTITUENCY ASSOCIATION ABBOTSFORD WEST CONSTITUENCY		ASS. ASS.		GENERAL VOTING DAY (YYYY / MM / DD) 2017 / 05 / 09	
REGISTERED POLITICAL PARTY / INDEPENDENT MLA BC NDP					
FINANCIAL AGENT'S LAST NAME Douglas		FIRST NAME Bob		MIDDLE NAME(S)	
FINANCIAL AGENT'S MAILING ADDRESS #3 3348 Mt Lehman Rd.					
CITY / TOWN Abbotsford BC		POSTAL CODE V4X 1Z0A9	PHONE NO. 604 856 4239		FAX NO.
EMAIL					

This financing report includes the following forms:

		FORMS CHECKLIST
		X
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 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 (YYYY / MM / DD) 2017 / 08 / 09
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WARNING: Signing a false statement is a serious offence and is subject to significant penalties.

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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

Abbotsford West Constituency Association

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) A 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) 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 H

Total dollar amount of all income tax receipts issued (Leadership Contestants cannot issue tax receipts) \$ 0 I

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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
Abbotstord west Constituency Associates

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FULL NAME OF CONTRIBUTOR <small>(If a numbered corporation or an unincorporated organization, include full names of two directors)</small>	CLASS OF CONTRIBUTOR <small>(X APPROPRIATE CLASS)</small>						INDIVIDUAL CONTRIBUTION AMOUNTS	DATE OF EACH INDIVIDUAL CONTRIBUTION <small>(YYYY/MM/DD)</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** *5*

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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 PAGE
Abbotstone West Constituency Association OF

DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
TOTAL			A <i>[Signature]</i>

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PROHIBITED CONTRIBUTIONS

S-Ax
(15/09)



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NAME OF FILING ENTITY
Abbotsford West Constituency Association

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DATE RECEIVED (YYY/MM/DD)	CIRCUMSTANCES	AMOUNT	DATE RETURNED (YYY/MM/DD)	OR	DATE REMITTED TO CHIEF ELECTORAL OFFICE (YYY/MM/DD)

TOTAL A *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 <i>Abbotsford west Constituency Association</i>	
Number of fundraising functions held	
Total gross fundraising function income (sum of boxes M on all S-F forms)	A
Total cost of fundraising functions (sum of boxes N 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 G on all S-F forms)	D
Total amount of gross income NOT reported as political contributions (sum of boxes L 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 campaign period	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

(Submit a separate form for each function held)

S-F
(15/07)

If form is for Nomination Contestant, please tick

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OF

NAME OF FILING ENTITY <u>Abbotsford West constituency Association</u>	
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"/>	<input type="checkbox"/>
Purchases by individuals of more than \$250 worth of tickets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Purchases by individuals of tickets that are more than \$50 each	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

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

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

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

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

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

Total gross income (G + L)

Total cost of function

Net Income (loss) (box M-N)

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LOANS AND GUARANTEES

S-L1
(15/06)

NAME OF FILING ENTITY
Abbot St fund west Constituency Associate

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OF

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		E		TOTAL		F	<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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LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

S-L2
(15/09)

NAME OF FILING ENTITY
Abbot Stord west Constituency Association

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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				
TOTALS								A		B	

* CLASS OF CONTRIBUTOR:
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TRANSFERS RECEIVED

S-T-Rcv
(15/06)



ELECTIONS BC
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NAME OF FILING ENTITY
ABBOTSFORD WEST CONSTITUENCY ASSOCIATION BCNDP

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DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
2017/04/04	B.C. NDP	11,412.12
TOTAL A		11,412.12

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TRANSFERS GIVEN

S-T-Giv
(15/06)

NAME OF FILING ENTITY
ABBOTSFORD WEST CONSTITUENCY ASSOCIATION BOUND

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DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
2017/04/06	Belinder Bains Financial Agent for Preet Rai	11412.12
TOTAL		A 11412.12

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