



# ELECTION FINANCING REPORT CANDIDATE

F-C  
(15/09)

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

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

CANDIDATE'S LAST NAME RYAN		FIRST NAME PHILLIP	MIDDLE NAME(S) JAMES
ELECTORAL DISTRICT VANCOUVER-FALSE CREEK	POLITICAL PARTY/AFFILIATION BC CITIZENS FIRST PARTY		GENERAL VOTING DAY (YYYY / MM / DD) 2017/05/09
FINANCIAL AGENT'S LAST NAME KNOESS		FIRST NAME AVRILLEE	MIDDLE NAME(S)
FINANCIAL AGENT'S MAILING ADDRESS 1238 MELVILLE STREET #202 2016-18 Hastings St			CITY / TOWN VANCOUVER W. Vancouver
POSTAL CODE V6E4N2 V6G 1G6	PHONE NUMBER 604.355.4069	FAX NUMBER	EMAIL ADDRESS avrillee@bccitizensfirst.ca

This financing report includes the following forms:

**All Candidates:**

**FORMS CHECKLIST**

- |   |               |                                     |
|---|---------------|-------------------------------------|
|   |               | <b>X</b>                            |
| Statement of Election Income and Expenses –                         | Form St-I&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"/> |
| Personal Expenses Paid by Financial Agent –                         | Form Sm-PE1   | <input checked="" type="checkbox"/> |
| Personal Expenses Paid by Candidate –                               | Form Sm-PE2   | <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"/> |

**Candidates Who Were Nomination Contestants:**

- |   |              |                          |
|---|--------------|--------------------------|
| Nomination Contestant Expenses –                                    | Form Sm-E-NC | <input 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 type="checkbox"/> |
| Permitted Anonymous Contributions Accepted at Functions –           | Form S-A2    | <input type="checkbox"/> |
| Personal Expenses Paid by Financial Agent –                         | Form Sm-PE1  | <input type="checkbox"/> |
| Personal Expenses Paid by Contestant –                              | Form Sm-PE2  | <input type="checkbox"/> |
| Summary of Fundraising Functions –                                  | Form Sm-F    | <input type="checkbox"/> |
| Fundraising Function –  | Form S-F     | <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

DATE (YYYY / MM / DD)

2017/06/30

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

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



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F-C  
(15/09)

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

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FINANCIAL AGENT'S LAST NAME KNOESS		FIRST NAME AVRILLEE	MIDDLE NAME(S)
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POSTAL CODE V6E4N2	PHONE NUMBER 604.355.4069	FAX NUMBER	EMAIL ADDRESS avrillee@bccitizensfirst.ca

This financing report includes the following forms:

**All Candidates:**

**FORMS CHECKLIST**

- |   |                          |                                     |
|---|--------------------------|-------------------------------------|
|   |                          | <b>X</b>                            |
| Statement of Election Income and Expenses –                         | <b>Form St-I&amp;E-E</b> | <input checked="" type="checkbox"/> |
| Summary of Expenses –   | <b>Form Sm-E</b>         | <input checked="" type="checkbox"/> |
| Summary of Political Contributions by Class –                       | <b>Form Sm-C</b>         | <input checked="" type="checkbox"/> |
| Political Contributions of Money / Property / Services over \$250 – | <b>Form S-A1</b>         | <input checked="" type="checkbox"/> |
| Permitted Anonymous Contributions Accepted at Functions –           | <b>Form S-A2</b>         | <input checked="" type="checkbox"/> |
| Prohibited Contributions –  | <b>Form S-Ax</b>         | <input checked="" type="checkbox"/> |
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| Personal Expenses Paid by Candidate –                               | <b>Form Sm-PE2</b>       | <input checked="" type="checkbox"/> |
| Summary of Fundraising Functions –                                  | <b>Form Sm-F</b>         | <input checked="" type="checkbox"/> |
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| Transfers Received –  | <b>Form S-T-Rcv</b>      | <input checked="" type="checkbox"/> |
| Transfers Given –   | <b>Form S-T-Giv</b>      | <input checked="" type="checkbox"/> |

**Candidates Who Were Nomination Contestants:**

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

I, the Financial Agent, declare that:

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- (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) 2017/06/30
----------------------------------	-------------------------------------

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## SEE AMENDMENT



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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  
PHILLIP RYAN

Total value of political contributions from all sources (from box E on form Sm-C)	<input type="text" value="0.00"/>	371.50
Total transfers received (from box A on form S-T-Rcv)	<input type="text" value="0.00"/>	
Interest income	<input type="text" value="0.00"/>	
Total gross fundraising function income not reported as political contributions (from box E on form Sm-F)	<input type="text" value="0.00"/>	
Candidate's nomination deposit refund	<input type="text" value="0.00"/>	
Other income (describe)	<input type="text" value="0.00"/>	

**Total Income** (sum of above boxes)  **A** 371.50

Total value of election expenses subject to limits (from box A on form Sm-E)	<input type="text" value="121.50"/>
Total value of election expenses not subject to limits (from box B on form Sm-E)	<input type="text" value="250.00"/>
Total value of other expenses (from box C on form Sm-E)	<input type="text" value="0.00"/>
Total transfers given (from box A on form S-T-Giv)	<input type="text" value="0.00"/>
<b>Total Expenditures</b> (sum of above boxes)	<input type="text" value="371.50"/> <b>B</b>

**For Candidates Only**

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



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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  
PHILLIP RYAN

Total value of political contributions from all sources (from box E on form Sm-C)	0.00	
Total transfers received (from box A on form S-T-Rcv)	0.00	
Interest income	0.00	
Total gross fundraising function income not reported as political contributions (from box E on form Sm-F)	0.00	
Candidate's nomination deposit refund	0.00	
Other income (describe)	0.00	
<b>Total Income</b> (sum of above boxes)	<b>0.00</b>	<b>A</b>

Total value of election expenses subject to limits (from box A on form Sm-E)	121.50	
Total value of election expenses not subject to limits (from box B on form Sm-E)	250.00	
Total value of other expenses (from box C on form Sm-E)	0.00	
Total transfers given (from box A on form S-T-Giv)	0.00	
<b>Total Expenditures</b> (sum of above boxes)	<b>371.50</b>	<b>B</b>

**For Candidates Only**

Balance in campaign account as of date of report .00 **C**

**SEE AMENDMENT**

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## SUMMARY OF EXPENSES

**Sm-E**  
(15/08)

NAME OF FILING ENTITY  
**PHILLIP RYAN**

<b>Election Expenses</b>	<b>Election Expenses Subject to Limits</b>	<b>Election Expenses Not Subject to Limits</b>	<b>Other Expenses</b>
Accounting and audit services		0	0
Bank charges	0	0	0
Candidate's nomination deposit		250.00	
Convention, workshop and meeting fees and rentals	0	0	0
Data processing / information technology	0	0	0
Donations and gifts	0		0
Excess nomination expenses (from box D, form Sm-E-NC)	0		
Furniture and equipment	0	0	0
Insurance	0	0	0
Interest expense	0	0	0
Media advertising	0	0	0
Newsletters and promotional material (signs, brochures, etc.)	55.00	0	0
Office rent, utilities and maintenance	31.50	0	0
Office supplies, stationery	0	0	0
Personal expenses of candidate (from box G, form Sm-PE1)		0	
Postage and courier	0	0	0
Professional services	0	0	0
Research and polling	0	0	0
Salaries and benefits	0	0	0
Social functions / thank-you parties	35.00	0	0
Telecommunications	0	0	0
Travel	0	0	0
Total cost of fundraising functions held during the campaign period (from box F, form Sm-F)		0	
Total cost of fundraising functions held outside the campaign period (from box G, form Sm-F)			0
Total net losses of fundraising functions which incurred net losses during the campaign period (from box H, form Sm-F)	0		
Other expenses (describe)	0	0	0
<b>Total Expenses</b>	<b>121.50</b> <b>A</b>	<b>250.00</b> <b>B</b>	<b>0.00</b> <b>C</b>

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# SUMMARY OF POLITICAL CONTRIBUTIONS BY CLASS

Sm-C  
(15/07)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY  
PHILLIP RYAN

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

	Contributions greater than \$250	Contributions of \$250 or less
371.50 Individuals	0 1a	0 1b
Corporations	0 2a	0 2b
Unincorporated Business / Commercial Organizations	0 3a	0 3b
Trade Unions	0 4a	0 4b
Non-profit Organizations	0 5a	0 5b
Other Identifiable Contributions	0 6a	0 6b
Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1)	0 A	0 B
371.50 Classified totals (A + B)	0 C	371.50
Total anonymous contributions (from box A, S-A2)	0 D	
Total value of all political contributions from all sources (C + D)	0 E	371.50
Total contributions of money	0 F	
Total contributions of goods, services and discounts (includes contributions through loans and debts)	0 G	371.50
(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)	\$ 0 I	

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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  
PHILLIP RYAN

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

	Contributions greater than \$250	Contributions of \$250 or less
Individuals	0 1a	0 1b
Corporations	0 2a	0 2b
Unincorporated Business / Commercial Organizations	0 3a	0 3b
Trade Unions	0 4a	0 4b
Non-profit Organizations	0 5a	0 5b
Other Identifiable Contributions	0 6a	0 6b
Classified subtotals (1a to 6a & 1b to 6b) (box A = box A, S-A1)	0 A	0 B
Classified totals (A + B)		0 C
Total anonymous contributions (from box A, S-A2)		0 D
Total value of all political contributions from all sources (C + D)		0 E

Total contributions of money 0 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) \$ 0 I

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**ELECTIONS BC**  
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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  
PHILLIP RYAN

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			
NIL									
Phillip Ryan		X					371.50	2017/04/11 2017/05/09	371.50

\* 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 0.00 371.50

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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 PHILLIP RYAN
---------------------------------------

PAGE	1
OF	1

DATE OF FUNCTION (YYYY/MM/DD)	DESCRIPTION OF FUNCTION	NUMBER OF PEOPLE ATTENDING	TOTAL AMOUNT OF ANONYMOUS CONTRIBUTIONS
	NOT APPLICABLE		
<b>TOTAL</b>			<b>A</b> 0.00

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## PERSONAL EXPENSES PAID BY FINANCIAL AGENT

**Sm-PE1**  
(15/06)

(Personal expenses of candidate or contestant  
which were paid by the financial agent)

If form is for Nomination Contest, please tick

NAME OF FILING ENTITY  
PHILLIP RYAN

**Paid by the Financial Agent**

<p>A. Transportation to, from or within electoral district</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">Air travel</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%;"></td> </tr> <tr> <td></td> <td>Bus, taxi</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td></td> <td>Rental vehicle</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td></td> <td>Private vehicle</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td colspan="2">Other (describe)</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">Total</td> <td style="text-align: center;">0</td> <td style="text-align: center;"><b>A</b></td> </tr> </table>		Air travel	0			Bus, taxi	0			Rental vehicle	0			Private vehicle	0		Other (describe)		0		Total		0	<b>A</b>	
	Air travel	0																							
	Bus, taxi	0																							
	Rental vehicle	0																							
	Private vehicle	0																							
Other (describe)		0																							
Total		0	<b>A</b>																						
<p>B. Cost of lodging, meals and incidental expenses while travelling</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">Hotel, motel</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%;"></td> </tr> <tr> <td></td> <td>Meals</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td colspan="2">Incidental expenses (describe)</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">Total</td> <td style="text-align: center;">0</td> <td style="text-align: center;"><b>B</b></td> </tr> </table>		Hotel, motel	0			Meals	0		Incidental expenses (describe)		0		Total		0	<b>B</b>									
	Hotel, motel	0																							
	Meals	0																							
Incidental expenses (describe)		0																							
Total		0	<b>B</b>																						
<p>C. Cost of renting a necessary temporary residence</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">Rent</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%; text-align: center;"><b>C</b></td> </tr> </table>		Rent	0	<b>C</b>																					
	Rent	0	<b>C</b>																						
<p>D. All other necessary personal expenses related to campaign or contest</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">Family care</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%;"></td> </tr> <tr> <td></td> <td>Disability expenses</td> <td style="text-align: center;">0</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">Total</td> <td style="text-align: center;">0</td> <td style="text-align: center;"><b>D</b></td> </tr> </table>		Family care	0			Disability expenses	0		Total		0	<b>D</b>													
	Family care	0																							
	Disability expenses	0																							
Total		0	<b>D</b>																						
<p>E. Total personal expenses paid by the financial agent</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">Total of items A to D</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%; text-align: center;"><b>E</b></td> </tr> </table>		Total of items A to D	0	<b>E</b>																					
	Total of items A to D	0	<b>E</b>																						
<p>F. Total personal expenses paid out of pocket by candidate or contestant</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">From Sm-PE2, box E</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%; text-align: center;"><b>F</b></td> </tr> </table>		From Sm-PE2, box E	0	<b>F</b>																					
	From Sm-PE2, box E	0	<b>F</b>																						
<p>G. Total personal expenses from Sm-PE1 and Sm-PE2</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 20%;">Total of items E + F</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 20%; text-align: center;"><b>G</b></td> </tr> </table>		Total of items E + F	0	<b>G</b>																					
	Total of items E + F	0	<b>G</b>																						



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# 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  
PHILLIP RYAN

### Paid by the Candidate or Contestant

A. Transportation to, from or within electoral district

Air travel

Bus, taxi

Rental vehicle

Private vehicle

Other (describe)

Total  **A**

B. Cost of lodging, meals and incidental expenses while travelling

Hotel, motel

Meals

Incidental expenses (describe)

Total  **B**

C. Cost of renting a necessary temporary residence

Rent  **C**

D. All other necessary personal expenses related to  
campaign or contest

Family care

Disability expenses

Total  **D**

E. Total personal expenses paid by candidate or contestant

Total of items **A** to **D**  **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 PHILLIP RYAN	
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)	
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>	
<b>For election financing reports only (see instructions in the Election Financing Report Completion Guide before completing this section)</b>	
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 <b>PHILLIP RYAN</b>	
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY) <b>NOT APPLICABLE</b>

**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
Purchases by individuals of more than \$250 worth of tickets				B
Purchases by individuals of tickets that are more than \$50 each				C

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)  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

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)			L
Total gross income (G + L)			M
Total cost of function			N
Net income (loss) (box M - N)	0.00		O



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# LOANS AND GUARANTEES

S-L1  
(15/06)

NAME OF FILING ENTITY  
**PHILLIP RYAN**

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) \$	
	NOT APPLICABLE																
<b>TOTAL</b>										<b>D</b>		<b>E</b>		<b>TOTAL</b>		<b>F</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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## LOANS AND DEBTS FORGIVEN OR WRITTEN OFF

**S-L2**  
(15/09)

NAME OF FILING ENTITY  
**PHILLIP RYAN**

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				
	NOT APPLICABLE										
<b>TOTALS</b>								<b>A</b>		<b>B</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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# TRANSFERS RECEIVED

**S-T-Rcv**  
(15/06)

NAME OF FILING ENTITY  
PHILLIP RYAN

PAGE 1  
OF 1

DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY TRANSFERRING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
	NOT APPLICABLE	
<b>TOTAL</b>		<b>A 0.00</b>

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# TRANSFERS GIVEN

**S-T-Giv**  
(15/06)

NAME OF FILING ENTITY  
PHILLIP RYAN

PAGE 1  
OF 1

DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY RECEIVING MONEY, GOODS OR SERVICES	VALUE OF TRANSFER
	NOT APPLICABLE	
<b>TOTAL</b>		<b>A</b> 0.00

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