



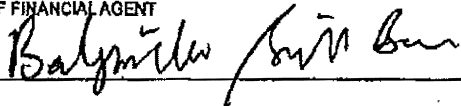
**ANNUAL FINANCIAL REPORT  
CONSTITUENCY ASSOCIATION**

**F-CA(A)**  
(17/12)

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

For Period 2018/01/01 to 2018/12/31  
YYYY/MM/DD YYYY/MM/DD

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

REGISTERED CONSTITUENCY ASSOCIATION <b>N.D.P ABBOTSFORD WEST CONSTITUENCY</b>			
REGISTERED POLITICAL PARTY / INDEPENDENT MLA <b>BC NDP</b>			
FINANCIAL AGENT'S LAST NAME <b>BAINS</b>		FIRST NAME <b>BALJINDER</b>	MIDDLE NAME(S) <b>SINGH</b>
FINANCIAL AGENT'S MAILING ADDRESS <b>3539 THURSTON PLACE</b>			
CITY/TOWN <b>ABBOTSFORD</b>	POSTAL CODE <b>V2T 1G1</b>	PHONE NO. <b>604-807-1995</b>	FAX NO.
EMAIL <b>bains_13@hotmail.com</b>			
This financial report includes the following forms:			FORMS CHECKLIST <b>X</b>
These forms must be included in all reports.		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"/>
Only complete these forms if there is information to report.		Summary of Political Contributions	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-L <input checked="" type="checkbox"/>
		Transfers Received and Given	Form S-TRF <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 <i>Election Act</i> ; and (c) to the best of my knowledge, information and belief, all the information contained in this report is complete and accurate.			
SIGNATURE OF FINANCIAL AGENT 		DATE (YYYY / MM / DD) <b>2018/03/25</b>	
<b>WARNING: Signing a false statement is a serious offence and is subject to significant penalties.</b>			

All forms included in this report are available for public inspection.  
PLEASE KEEP A COPY FOR YOUR RECORDS

This information is collected under the authority of the *Election Act* and the *Freedom of Information and Protection of Privacy Act*. The information will be used to administer provisions under the *Election Act*. Questions can be directed to: Privacy Officer, Elections BC 1-800-861-8883, [privacy@elections.bc.ca](mailto:privacy@elections.bc.ca) or PO Box 9275 Stn Prov Govt, Victoria BC V8W 6J9



# STATEMENT OF ASSETS AND LIABILITIES

St-A&L  
(15/06)

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AS OF DATE (YYYY / MM / DD)  
2018/12/31

NAME OF FILING ENTITY		
ND.P. ABBOTSFORD WEST CONSTITUENCY		
<b>Current Assets</b>	Cash on hand	\$ 0.00
	Cash on deposit	
	Accounts receivable	
	Bonds, stocks, other investments	
	Inventory	
Other (describe)		
<b>Total Current Assets</b>		
<b>Fixed Assets</b>	Investments	
	Furniture and fixtures (less accumulated amortization)	( )
	Office equipment (less accumulated amortization)	( )
	Land and buildings (less accumulated amortization)	( )
	Other (describe)	
(less accumulated amortization)		( )
<b>Total Fixed Assets</b>		
<b>Total Assets</b>		0.00 <b>A</b>
<b>Current Liabilities</b>	Accounts payable	
	Wages, salaries payable	
	Loans payable	
Other (describe)		
<b>Total Current Liabilities</b>		
<b>Long-term Liabilities</b>	Loans payable	
Other (describe)		
<b>Total Long-term Liabilities</b>		
<b>Total Liabilities</b>		0.00 <b>B</b>
<b>Accumulated Surplus (Deficit) (A - B)</b>		\$ 0.00 <b>C</b>

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Elections BC 1-800-881-8683 [privacy@elections.bc.ca](mailto:privacy@elections.bc.ca) or PO Box 9276 Stn Prov Govt, Victoria BC V8W 9J8

# STATEMENT OF INCOME AND EXPENSES

NAME OF FILING ENTITY		
NDP. ABBOTSFORD WEST CONSTITUENCY		
<b>Income:</b>	Total political contributions (box D, \$m-C)	0.00
	Gross fundraising income not reported as political contributions (box E, \$m-F)	
	Total transfers received (box A, \$-TRF)	
	Interest/Investment Income	
	Product sales	
	Advertising Income	
	Rental Income	
	Reimbursement of election expenses	
	Annual allowance	
Other income (describe)		
	<b>Total Income</b>	0.00 <span style="float: right; border: 1px solid black; padding: 2px;">A</span>
<b>Expenses:</b>	Accounting and audit services	
	Amortization expense	
	Bad debt expense	
	Bank charges	
	Convention, workshop and meeting fees and rentals	
	Donations and gifts	
	Furniture and equipment	
	Insurance	
	Interest expense	
	Media advertising	
	Newsletter and promotional materials (signs, brochures, etc.)	
	Office rent, utilities and maintenance	
	Office supplies, stationery	
	Postage and courier	
	Professional services	
	Research and polling	
	Salaries and benefits	
	Social functions/thank-you parties	
	Subscriptions and dues	
	Telecommunications/information technology	
	Travel	
	Total cost of fundraising functions (box B, \$m-F)	
	Total transfers given (box B, \$-TRF)	
Other expenses (describe)		
	<b>Total Expenses</b>	0.00 <span style="float: right; border: 1px solid black; padding: 2px;">B</span>
	<b>Period Surplus (Deficit) (A - B)</b>	0.00 <span style="float: right; border: 1px solid black; padding: 2px;">C</span>



# SUMMARY OF POLITICAL CONTRIBUTIONS

Sm-C  
(17/12)

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If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY

N.D.P. ABBOTSFORD WEST CONSTITUENCY

Contributions must be accepted by from eligible individuals.

	Number of contributors	Value of contributions (\$)	
Contributions greater than \$250			A
Contributions of \$250 or less			B
Anonymous contributions (box A, S-A2)			C
Total value of political contributions from all sources (A + B + C)			D

Total contributions of money		E
Total contributions of goods and services		F

(boxes E and F must equal box D)

Total dollar amount of income tax receipts issued (Leadership contestants cannot issue tax receipts)	\$ 0.00	G
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**POLITICAL CONTRIBUTIONS WITH A  
TOTAL VALUE GREATER THAN \$250**

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY  
**NDP ABBOTSFORD WEST CONSTITUENCY**

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OF

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				INDIVIDUAL CONTRIBUTION AMOUNT	DATE RECEIVED (YYYY/MM/DD)	TYPE*	FOR TYPES 1-5, DATE OF EVENT (YYYY/MM/DD)	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	ADDRESS	CITY	PROV.	POSTAL CODE					

\* **TYPE OF CONTRIBUTION:** 1 – Fundraising function ticket sold for more than \$250, 2 – Property/services purchased for more than \$250 above market value at a fundraising function, 3 – Property/boonious with a value greater than \$250 donated for sale at a fundraising function, 4 – Fees to attend a convention (political parties only), 5 – Fees to attend a leadership convention (political parties only), 6 – All other contributions received

<b>TOTAL OF INDIVIDUAL CONTRIBUTIONS</b>	A	0.00
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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  
 NOP ABBOTSFORD WEST CONSTITUENCY

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

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# PROHIBITED CONTRIBUTIONS

**S-Ax**  
(17/12)

NAME OF FILING ENTITY  
**AP N.D.P ABBOTSFORD WEST CONSTITUENCY**

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DATE RECEIVED (YYYY/MM/DD)	CIRCUMSTANCES	AMOUNT	DATE RETURNED (YYYY/MM/DD)	OR	DATE REMITTED TO ELECTIONS BC (YYYY/MM/DD)
<b>TOTAL</b>		<b>A</b>	<b>0.00</b>		

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# SUMMARY OF FUNDRAISING FUNCTIONS

(Total amounts from all forms S-F)

**Sm-F**  
(17/12)

If form is for Nomination Contestant, please tick

NAME OF FILING ENTITY	
N. D. P. ABBOTSFORD WEST CONSTITUENCY	
Number of fundraising functions held	<input type="text"/>
Total gross fundraising function income (sum of boxes L on all S-F forms)	<input type="text"/> A
Total cost of fundraising functions (sum of boxes M on all S-F forms)	<input type="text"/> B
Total net income (or loss) from fundraising functions (A - B)	<input type="text"/> C
Total amount of gross income reported as political contributions (sum of boxes F on all S-F forms)	<input type="text"/> D
Total amount of gross income NOT reported as political contributions (sum of boxes K on all S-F forms)	<input type="text"/> E
(boxes D + E must equal box A)	
<b>For election financing reports only</b>	
Total cost of fundraising functions held during the campaign period	<input type="text"/> F
Total cost of fundraising functions held outside the campaign period	<input type="text"/> G
Total net losses of fundraising functions which incurred net losses during the campaign period	<input type="text"/> H
<b>For leadership contestant financing reports only</b>	
Total net losses of fundraising functions which incurred net losses	<input type="text" value="0.00"/> I





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# FUNDRAISING FUNCTION

(Submit a separate form for each function held)

**S-F**  
(18/01)

If form is for Nomination Contestant, please tick

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NAME OF FILING ENTITY <b>N.D.P ABBOTSFORD WEST CONSTITUENCY</b>	
DATE OF EVENT (YYYY/MM/DD)	DESCRIPTION OF FUNDRAISING EVENT (IF A JOINT EVENT, IDENTIFY OTHER ENTITY)

If event is a specified fundraising function, tick box and attach Spec-FF form.

### Gross Income reported as political contributions

	Number of Tickets Sold	Charge per Ticket	Total Charges Collected	Tick if Charge per Ticket Varies
Purchases by eligible individuals of a single ticket for more than \$50			A	
Purchases by eligible individuals of more than one ticket			B	

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

	C
	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 eligible individuals of a single ticket for \$50 or less			G	

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

	H
	I
	J

Total gross income not reported as political contributions (G + H + I + J)  0.00 K

Total gross income (F + K)  0.00 L

Total cost of function  0.00 M

Net income (loss) (L - M)  0.00 N

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# PERMISSIBLE LOAN OR GUARANTEE

(Submit a separate form for each loan or guarantee)

**S-L**  
(18/01)

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NAME OF FILING ENTITY	
ND.P ABBOTSFORD WEST CONSTITUENCY	
Please Indicate: LOAN <input type="checkbox"/> GUARANTEE <input type="checkbox"/>	
NAME OF SAVINGS INSTITUTION MAKING LOAN OR GUARANTEE	
DATE RECEIVED (YYYY/MM/DD)	DATE DUE (YYYY/MM/DD)
ORIGINAL AMOUNT \$	PRIME INTEREST RATE %
AMOUNT OUTSTANDING \$	INTEREST RATE %
<b>Complete dates only if applicable:</b>	
Default on loan	DATE (YYYY/MM/DD)
Call on guarantee for loan	DATE (YYYY/MM/DD)
Non-compliance date with terms and conditions	DATE (YYYY/MM/DD)

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# TRANSFERS RECEIVED AND GIVEN

**S-TRF**  
(17/12)

NAME OF FILING ENTITY  
**N.D.P ABBOTSFORD WEST CONSTITUENCY**

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DATE OF TRANSFER (YYYY/MM/DD)	NAME OF ENTITY TRANSFER WAS RECEIVED FROM OR GIVEN TO	VALUE OF TRANSFER RECEIVED	VALUE OF TRANSFER GIVEN
2018/08/01	N.D.P - BC N.D.P	\$4,000.00	
2018/08/11	TRANSFER GIVEN PREET RAI (ELECTION DEBT)		\$4,298.36
TOTAL		A \$4,000.00	B \$4,298.36

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