

Instructions

All candidates must complete Boxes A, B, C, D, E and F and Schedule 1. All candidates must complete Schedules 2, 3 and 4 as appropriate. Candidates who receive contributions or incur expenses in excess of \$10,000 must also attach an Auditor's Report.

All surplus funds (after any refund to the candidate or his or her spouse) shall be paid immediately over to the clerk who was responsible for the conduct of the election.

For the campaign period from (day candidate filed nomination)

YYYY	MM	DD
2010	09	09

 to

YYYY	MM	DD
2010	12	23

- Primary filing reflecting finances to December 31 (or 45th day after voting day in a by-election)
- Supplementary filing including finances after December 31 (or 45th day after voting day in a by-election)

Box A: Name of Candidate and Office

Name of Candidate			Middle Initial		
Last Name		First Name	Middle Initial		
King		Stephen	G.		
Mailing Address					
Suite/Unit No.	Street No.	Street Name			
	4130	Broughton Avenue			
City/Town			Province	Postal Code	
Niagara Falls			Ontario	L2E 3K6	
Telephone No. (incl. area code)		Fax No.	Email Address		
Business	Home		steveking61@msn.com		
	905-401-5410				
Name of office for which the candidate sought election			Ward Name or No. (if any)		
Mayor					
Name of Municipality					
Niagara Falls					

Box B: Summary of Campaign Income and Expenses

1. My spending limit (as issued by clerk) was - - - - -	\$ 60946.30
2. Surplus (or deficit) from previous election - - - - -	\$ 0
3. Total contributions received (from Schedule 1) - - - - -	\$ 1145.16
4. My total campaign expenses that were subject to the spending limit were (from Box C) - - -	\$ 9739.39
5. My total campaign expenses that were not subject to the spending limit were (from Box C) - - -	\$ 0
6. Total of all campaign expenses (from Box C) - - - - -	\$ 9739.39
7. Election campaign surplus/deficit from current election (from Box E) - - - - -	\$ 8279.23
8. Contributions refunded to candidate or spouse (from Box E) - - - - -	\$ 0
9. Amount paid to clerk (from Box E) - - - - -	\$ 0

Box C: Statement of Campaign Period Income and Expenses

From YYYY	MM	DD	To YYYY	MM	DD	For Candidate
2010	09	09	2010	12	23	Stephen King

INCOME

Candidate's surplus from immediately preceding election released by the clerk	+	\$ 315.00
Contributions from candidate	+	\$ 235.16
Contributions from spouse of candidate	+	\$ 0
All other contributions	+	\$ 910.00
Revenue from fund-raising functions not deemed a contribution (from Schedule 2, Part III)	+	\$ 0
Interest income	+	\$ 0
Other (provide full details)		
1.	+	\$
2.	+	\$
3.	+	\$

Total Campaign Period Income = **\$ 1460.16** C1

EXPENSES (Note: include the value of contributions of goods and services)

Expenses Subject to Spending Limit

Advertising	+	\$ 0
Bank charges	+	\$ 30.00
Brochures	+	\$ 229.39
Interest on loan	+	\$ 0
Inventory contributed to candidate's campaign (Schedule 3)	+	\$ 8075.00
Meetings hosted	+	\$ 0
Nomination filing fee	+	\$ 200.00
Office expenses	+	\$ 0
Phone and/or Internet	+	\$ 0
Salaries and benefits/honoraria/professional fees	+	\$ 600.00
Signs	+	\$ 105.00
Other (provide full details)		
1. Gasoline	+	\$ 500.00
2.	+	\$
3.	+	\$

Subtotal = **\$ 9739.39** C2

Expenses Not Subject to Spending Limit

Accounting and audit	+	\$
Costs of fund-raising function (from Schedule 2, Part IV)	+	\$
Expenses related to compliance audit	+	\$
Expenses related to controverted elections	+	\$
Expenses related to recounts	+	\$
Voting day party / appreciation notices	+	\$
Expenses related to candidate's disability (provide details)		
1.	+	\$
2.	+	\$
3.	+	\$
Other (provide full details)		
1.	+	\$
2.	+	\$
3.	+	\$

Subtotal = **\$** C3

Total Campaign Period Expenses (C2) + (C3) = **\$ 9739.39** C4

Excess (Deficiency) of Income over Expenses (C1) - (C4) = **\$ (8279.23)**

Box D: Statement of Assets and Liabilities as at Dec, 23 , 2010

Assets

Cash - - - - -	+	\$ 255.77	
Accounts receivable - - - - -	+	\$ 0	
Value of inventory retained (from Schedule 4) - - - - -	+	\$ 6825.00	
Other (provide full details)			
1. _____	+	\$ _____	
2. _____	+	\$ _____	
3. _____	+	\$ _____	
Total Assets - - - - -	=		\$ 7080.77

Liabilities and Excess (Deficiency) of Income over Expenses

Accounts payable - - - - -	+	\$ _____	
Borrowings, overdraft - - - - -	+	\$ _____	
Other (provide full details)			
1. _____	+	\$ _____	
2. _____	+	\$ _____	
3. _____	+	\$ _____	
Total Liabilities - - - - -	=		\$ 0

Box E: Statement of Determination of Surplus or Deficit and Disposition of Surplus

Part I – Determination of Surplus or Deficit

Amount of excess (deficiency) of income over expenses (from Box C) - - - - -	+	\$ (8279.23)	E1
Deduct: Any deficit carried forward by the candidate from immediately preceding election if the offices are with respect to the same jurisdiction - - - - -	-	\$ 0	E2
Surplus (or deficit) for the campaign period (E1) – (E2) - - - - -	=	\$ (8279.23)	
Deduct: Any refund of contributions to the candidate or spouse (only if there is a surplus) - - - - -	-	\$ 0	
Total Determination - - - - -	=	\$ (8279.23)	E3

Part II – Disposition of Surplus

If line E3 shows a surplus, the amount must be paid in trust, at the time the financial statements are filed, to the municipal clerk who was responsible for the conduct of the election.

Surplus paid to the municipal clerk of the municipality of _____

Box F: Declaration

I, Stephen King, a candidate in the municipality of Niagara Falls, hereby declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct.

Declared before (clerk or commissioner)
in the City of Niagara Falls
on (yyyy/mm/dd) 2010/12/28

Sheila Morocco
Signature of Clerk or Commissioner

Stephen King
Signature of Candidate

2010/12/28 SKC
Date Filed in the Clerk's Office (yyyy/mm/dd)

Sheila Marie Morocco, a Commissioner, etc.,
Regional Municipality of Niagara,
for the Corporation of the
City of Niagara Falls.
Expires September 1, 2011.

Table 2: Monetary contributions from unions or corporations

Name (Legal and Carrying on Business As)	Address	President or Business Manager	Cheque Signatory	Amount
Holiday Inn Niagara Falls Limited	5339 Murray St. Niagara Falls, On. L2G 2J3	Michael Yerich	Michael Yerich	\$ 750.00
				\$
				\$
				\$
				\$
				\$
				\$
				\$
<input type="checkbox"/> Additional information is listed on separate supplementary attachment				Total \$ 750.00

Table 3: Contributions in goods or services (Note: must also be reported as expenses in Box C)

Name	Address	Goods or Services	Amount
Katen Chander	225 Sherway Drive Suite 504 Etobicoke, ON, M9C 0A7	One 4'x8' sign	\$ 105.00
Bob Gale	4388 Portage Road Niagara Falls, ON L2E 6A4	Gasoline	\$ 500.00
			\$
			\$
			\$
			\$
			\$
<input type="checkbox"/> Additional information is listed on separate supplementary attachment			Total \$ 605.00

Total Part II Contributions

\$ 605.00

**Schedule 3 – Inventory of Campaign Goods and Materials (from Previous Campaign)
Used in Candidate's Campaign**

Description	Date Acquired (yyyy/mm/dd)	Supplier	Unit Value	Quantity	Total Value
Signs	2006/11/02	Harris Sign	\$ 100.00	47	\$ 4700
Signs	2006/11/02	Harris Sign	\$ 15.00	225	\$ 3375
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
Total Value of Inventory from Previous Campaign Used in Candidate's Campaign					\$ 8075.00

Schedule 4 – Inventory of Campaign Goods and Materials at The End of Campaign

Description	Date Acquired (yyyy/mm/dd)	Supplier	Unit Value	Quantity	Total Value
Signs	2006/11/02	Harris Sign	\$ 100.00	36	\$ 3600.00
Signs	2006/11/02	Harris Sign	\$ 15.00	208	\$ 3120.00
Sign	2010/10/01	Katen Chander	\$ 105.00	1	\$ 105.00
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
Total Value of Inventory of Campaign Goods and Materials					\$ 6825.00

Auditor's Report*Municipal Elections Act, 1996 (Section 78)*

A candidate who has received contributions or incurred expenses in excess of \$10,000 must attach an auditor's report. The report must be done in accordance with generally accepted auditing standards and must:

- set out the scope of the examination
- provide an opinion as to the completeness and accuracy of the financial statement and whether it is free of material misstatement

Professional Designation of Auditor

Municipality		Date (yyyy/mm/dd)	
Contact Person Last Name	First Name		Licence No.
Address Suite/Unit No.	Street No.	Street Name	
City/Town		Province	Postal Code
Telephone No. (incl. area code) ext.	Fax No.	Email Address	

MIRAC FILLS CLERKS 7 10 1228 10:44