

### Ministère des Affaires municipales et du Logement

## État financier – Rapport du vérificateur candidat – Formulaire 4

Loi de 1996 sur les élections municipales (article 88.25)

#### Instructions

Tous les candidats doivent remplir les sections A et B. Les candidats qui reçoivent des contributions ou engagent des dépenses doivent remplir les sections C et D ainsi que les annexes 1 et 2, s'il y a lieu. Les candidats qui reçoivent des contributions ou engagent des dépenses supérieures à 10 000 \$ doivent également joindre le rapport d'un vérificateur.

Tout excédent (après remboursement au candidat ou à son conjoint) doit être versé immédiatement au secrétaire chargé de l'élection.

Pour la période de campagne allant du (date de AAAA MM JJ AAAA MM JJ réception de la nomination par le secrétaire) 2 0 2 2 0 8 0 3 au 2 0 2 3 0 3 3 1							
Dépôt initial faisant état d cas d'une élection partiell	es finances du dél e)	but de la campagi	ne au 31 décembre	(ou 45 jours après la date	du scrutin dans le		
Dépôt supplémentaire fais	ant état des financ	es du début de la	campagne à la fin d	e sa période de prolongati	on		
Section A : Nom du ca	ndidat et titre	du poste					
Nom du candidat ayant figure	sur le bulletin de	vote					
Nom de famille ou nom unique Morais	ie		Prénom(s) Pauline				
Titre du poste pour lequel le Conseiller scolaire	candidat s'est prés	senté à l'élection	Nom ou numéro (le Tecumseh 1,2,3 l	cas échéant) du quartier akeshore 1,2			
Municipalité Tecumseh			***				
Plafond de dépenses				Plafond de contributions			
Général (185. 95\$	Célébrations e	t autres marques	de reconnaissance \$	Contributions du candidat	t et de son conjoint \$		
Je n'ai accepté aucune c	ontribution ni enga	gé aucune dépen	se. (Remplir les sec	tions A et B seulement)			
Section B : Déclaration	1						
Je, Pauline Morais				, déclare qu'à ma co	nnaissance et		
selon ce que je tiens pour vé	ridique, les présen	nts états financier	s et les annexes qui	les accompagnent sont vi	ais et exacts.		
		•		5			
( Sauline	Mon	us		2023/03/30			
	Signaturé du ca	ndidat		Date (aaaa/m	m/jj)		
Date de dépôt (aaaa/mm/jj)	Heure de dépôt	Initiales du candi	dat ou du mandatair		e ou de la		
2023/03/30	10:000m	(si le dépôt est s	fectué en personne)	personne désignée	ad la		
	L		9	of general	COUL		

#### Box C: Statement of Campaign Income and Expenses LOAN Name of bank or recognized lending institution Amount borrowed INCOME Total amount of all contributions (from line 1A in Schedule 1) Revenue from items \$25 or less Sign deposit refund + \$ Revenue from fundraising events not deemed a contribution (from Part III of Schedule 2) + \$ Interest earned by campaign bank account Other (provide full details) 3. + \$ 4. 5. 6. C1 = \$ Total Campaign Income (Do not include loan) **EXPENSES** (Note: Include the value of contributions of goods and services) 1. Expenses subject to general spending limit Inventory from previous campaign used in this campaign + \$ (list details in Table 2 of Schedule 1) Advertising Brochures/flyers + \$ Signs (including sign deposit) + \$ Meetings hosted + \$ Office expenses incurred until voting day Phone and/or internet expenses incurred until voting day Salaries, benefits, honoraria, professional fees incurred until voting day + \$ Bank charges incurred until voting day + \$ Interest charged on loan until voting day Other (provide full details) 1. + \$ 2. 3. 4. 5. + \$ + \$ Total Expenses subject to general spending limit = \$ C2 2. Expenses subject to spending limit for parties and other expressions of appreciation



# Financial Statement – Auditor's Report Candidate – Form 4 Municipal Elections Act, 1996 (Section 88.25)

#### Instructions

All candidates must complete Boxes A and B. Candidates who receive contributions or incur expenses must complete Boxes C, D, Schedule 1 and Schedule 2 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 their spouse) shall be immediately paid to the clerk who is responsible for the conduct of the election.

For the campaign period	from (day	clerk rec	eived nominatio	n)		им	DD t	0	YYYY	ММ	DD
Initial filing reflecting fir	ances fron	n start of c	ampaign to Dece	mber 31 (or 45	days	after v	oting d	ay in a	by-electic	n)	
Supplementary filing reflecting finances from start of campaign to end of extended campaign period											
Box A: Name of Can	didate ar	nd Office									-
Candidate's name as show	n on the b	allot				- 7 7 12.	- 311111 - 2			<del>- 2, y</del>	2
Last Name or Single Name				Given Name(s	)						
Office for Which the Candi	date Sough	nt Election		Ward Name or	r Num	nber (if	any)			-	
Municipality											
Spending Limit						Contri	ibution I	_imit			
General \$		Parties and	Other Expression	ons of Appreciat	tion	Contri \$	ibutions	from (	Candidate	and Sp	oouse
I did not accept any con	ntributions	or incur an	y expenses. (Co	mplete Boxes A	and	B only	·)				
Box B: Declaration											
I,					, de	clare t	hat to th	ne best	t of my kno	owledg	e and
belief that these financial s	tatements	and attach	ed supporting sc	hedules are tru	e and	correc	ct.				
	Signatu	re of Cand	aidate				Date	(yyyy/i	mm/dd)		
Date Filed (yyyy/mm/dd)	Time Filed		nitial of Candidat	e or Agent (if fil	led in	persor	n) Sig	nature	of Clerk	or Desi	gnate

2.	+ \$			
3.	+ \$		_	
4.	+ \$			
5.	+ \$			
Total Expenses subject to spending limit for parties and other expressions of appreciation	= \$	O	C3	
3. Expenses not subject to spending limits				
Accounting and audit	+ \$			
Cost of fundraising events/activities (list details in Part IV of Schedule 2)	+ \$			
Office expenses incurred after voting day	+ \$			
Phone and/or internet expenses incurred after voting day	+ \$			
Salaries, benefits, honoraria, professional fees incurred after voting day	+ \$			
Bank charges incurred after voting day	+ \$			
Interest charged on loan after voting day	+ \$			
Expenses related to recount	+ \$			
Expenses related to controverted election	+ \$		<del></del>	
Expenses related to compliance audit	+ \$			
Expenses related to candidate's disability (provide full details)				
1.	+ \$			
2.	+ \$			
3.	+ \$			
4.	+ \$			
5.	+ \$			
Other (provide full details)				
1.	+ \$		_	
2.	+ \$			
3.	+ \$			
4.	+ \$			
5.	+ \$			
Total Expenses not subject to spending limits	= \$	0	C4	
Total Campaign Expenses (C2 + C3 + C4)		0	= \$	C
Box D: Calculation of Surplus or Deficit				
Excess (deficiency) of income over expenses (Income minus Total Expenses) (C1 – C5)	+ \$	0	D1	
If there is a surplus, deduct any refund of candidate's or spouse's contributions to the campaign	- \$			`
Surplus (or deficit) for the campaign			= \$	

If line D2 shows a surplus, the amount must be paid in trust, at the time the financial statements are filed, to the municipal clerk who is responsible for the conduct of the election.

Schedule 1 – Contributions							
Part I – Summary of Contributions		102-00					
Contributions in money from candidate and s	spouse		+ \$				
Contributions in goods and services from car (include value listed in Table 1 and Table 2)	ndidate and spouse	<b>;</b>	+ \$				
<ul> <li>Total value of contributions not exceeding \$100 per contributor</li> <li>Include ticket revenue, contributions in money, goods and services where the total contribution from a contributor is \$100 or less (do not include contributions from candidate or spouse).</li> </ul>				ł			
Total value of contributions exceeding \$100 (from line 1B; list details in Table 3 and Table • Include ticket revenue, contributions in mowhere the total contribution from a contribution of the contribution from candidates.	e 4) ney, goods and ser utor exceeds \$100	rvices	+_\$				
Less: Ineligible contributions paid or payable Contributions paid or payable to the cl from anonymous sources exceeding \$	erk, including contri	ibutions	- <u>\$</u> - \$				
Total Amount of Contributions (record under I	ncome in Box C)		= \$		()	1A	
Dart II Contributions from condidate	0 H 0 M 0 H 0 0						
Part II – Contributions from candidate Table 1: Contributions in goods or service	•						
Description of Goods or Services					Date	Received	Value (\$)
						//mm/dd)	7-11-147
						Total	
Additional information is listed on separate Table 2: Inventory of campaign goods and	l materials from p	revious mu	nicipal	campa	ign us		ampaign
(Note: Value must be recorded as a contri Description		Supplier	id as an	expen	se.)	Quantity	Current Market
Bescription	(yyyy/mm/dd)	Supplier				Quantity	Value (\$)
30-1-00-1-00-1-00-1-00-1-00-1-00-1-00-1							
						Total	
Additional information is listed on separat	e supplementary at	tachment, if	comple	ted ma	nually.		

Part III - Contributions exceeding \$100 per contributor - individuals other than candidate or spouse

	Full Address	Date Received (yyyy/mm/dd)	Amount Received (\$)	Amount Returned to Contributor or Paid to Clerk (\$)
		Total		
Additional informati	on is listed on congrete supplem	entary attachment, if completed ma	poually	J
	on is listed on separate supplem	ontary attachment, in completed me	arradity.	
		lividuals other than candidate or .)	spouse	
	s in goods or services from indecorded as Expenses in Box C Full Address		Date Received (yyyy/mm/dd)	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received	Value (\$)
(Note: Must also be re	ecorded as Expenses in Box C	Description of Goods	Date Received (yyyy/mm/dd)	Value (\$)
(Note: Must also be re	Full Address	Description of Goods or Services	Date Received (yyyy/mm/dd)	Value (\$)
Name  Additional informat	Full Address	Description of Goods or Services  entary attachment, if completed ma	Date Received (yyyy/mm/dd)	Value (\$)

Schedule 2 – Fundraising Events and Activities				
Complete a separate schedule for each event or activity held.	Additional schedule(s	attached,	if comple	ted manually
Fundraising Event/Activity 1				
Description of fundraising event/activity				
Date of event/activity (yyyy/mm/dd)				
Part I – Ticket revenue				
Admission charge (per person)	\$	2A		
(If there are a range of ticket prices, attach complete breakdown of a	all ticket sales)			
Number of tickets sold	X	2B		
Total Part I (2A X 2B) (include in Part I of Schedule 1)			= \$	
Part II – Other revenue deemed a contribution				
Provide details (e.g., revenue from goods sold in excess of fair mark	cet value)			
1	+ \$			
2.	+ \$			
3	+ \$			
4	+ \$			
5	+ \$			
Total Part II (include in Part I of Schedule 1)  Part III – Other revenue not deemed a contribution  Provide details (e.g., contribution of \$25 or less; goods or services s	old for \$25 or less)			
1,	+ \$			
2.	+ \$			
3	+ \$			
4	+ \$			
5.	+ \$			
Total Part III (include under Income in Box C)			= \$	
Part IV – Expenses related to fundraising event or activity	F			
Provide details				
1.	+ \$			
2.	+ \$			
3.	+ \$			
4.	+ \$			
5.	+ \$			
Total Part IV Expenses (include under Expenses in Box C)			= \$	$\bigcirc$

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Auditor's Report – Municipal L	Elections Act, 199	96 (Section 88.25)	- 4-
A candidate who has received contrib	utions or incurred ex	penses in excess of \$10,000 must	attach an auditor's report.
Professional Designation of Auditor			
Municipality			Date (yyyy/mm/dd)
Contact Information		<del></del>	
Last Name or Single Name		Given Name(s)	Licence Number
Address			
Suite/Unit Number   Street Number	Street Name		
Municipality		Province	Postal Code
Telephone Number	Email Address		
The report must be done in accordance set out the scope of the examter provide an opinion as to the composite misstatement Report is attached	nination	epted auditing standards and must	
Personal information, if any, collected	on this form is obtain	ned under the authority of sections	88.25 and 95 of the Municipal

Personal information, if any, collected on this form is obtained under the authority of sections 88.25 and 95 of the *Municipal Elections Act*, 1996. Under section 88 of the *Municipal Elections Act*, 1996 (and despite anything in the *Municipal Freedom of Information and Protection of Privacy Act*) documents and materials filed with or prepared by the clerk or any other election official under the *Municipal Elections Act*, 1996 are public records and, until their destruction, may be inspected by any person at the clerk's office at a time when the office is open. Campaign financial statements shall also be made available by the clerk in an electronic format free of charge upon request.

#### RECEIPT RECORD



TOWN OF TECUMSEH 917 LESPERANCE RD TECUMSEH, ON N8N 1W9

Phone No.: (519)735-2184 Fax No. : (519)735-6712

--- Item ID #0001 ---

MISC : MISCELLANEOUS

Ref: MORAIS

10 100.00 100.00 Payment Subtotal 100.00

PST 0.00

0.00 GST/HST 875698821

> Payment Total 100.00

========= CHEQUE 100.00

NAME: PAULINE MORAIS

TEXT: NOMINATION FEE

Change 0.00

03-Aug-22 D:0000004264 14:40:09

B:2022080301 R:0000197573

CASHIER2

Thank you for your payment !!!