

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.

Supplementary filing reflecting finances from start of campaign to end of extended campaign period Box A: Name of Candidate and Office Candidate's name as shown on the ballot Last Name or Single Name Grant Office for Which the Candidate Sought Election Mayor Municipality Ward Name or Number (if any) Municipality Wainfleet Spending Limit General Spending Limit General Parties and Other Expressions of Appreciation \$1,277.34 Parties and Other Expressions of Appreciation \$1,277.34 Bid not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration I, Brian Grant Delief that these financial statements and attached supporting schedules are true and correct. Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clark or Designate	For the campaign period from (day	clerk received nominatio	1	MM DD 0 8 1 9 to 2	YYYY
Box A: Name of Candidate and Office Candidate's name as shown on the ballot Last Name or Single Name Grant Office for Which the Candidate Sought Election Mayor Municipality Wainfleet Spending Limit General Spending Limit General \$1,277.34 Parties and Other Expressions of Appreciation \$1,277.34 Plate and Other Expressions of Appreciation Spending Limit Contributions from Candidate and Spouse \$8,740.80 I did not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration I, Brian Grant Signature of Candidate Date (yyyy/mm/dd) Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	✓ Initial filing reflecting finances from	n start of campaign to Dece	ember 31 (or 45 days	after voting day in a	a by-election)
Candidate's name as shown on the ballot Last Name or Single Name Grant Office for Which the Candidate Sought Election Mayor Municipality Wainfleet Spending Limit General \$12,773.40 I did not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration I, Brian Grant Jate (yyyy/mm/dd) Signature of Candidate Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	Supplementary filing reflecting fin	ances from start of campaig	n to end of extended	d campaign period	
Last Name or Single Name Grant Office for Which the Candidate Sought Election Mayor Municipality Wainfleet Spending Limit General \$12,773.40 Parties and Other Expressions of Appreciation \$1,277.34 Poster Filed (yyyy/mm/dd) Parties and attached supporting schedules are true and correct. Given Name(s) Brian Ward Name or Number (if any) Ward Name or Number (if any) Ward Name or Number (if any) Contribution Limit Contributions from Candidate and Spouse \$8,740.80 Contribution Limit Contributions from Candidate and Spouse \$8,740.80 Additional Spouse Signature of Candidate Date (yyyy/mm/dd) Date (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	Box A: Name of Candidate ar	nd Office			
Grant Office for Which the Candidate Sought Election Mayor Municipality Wainfleet Spending Limit General \$12,773.40 I did not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration I, Brian Grant Signature of Candidate Date (yyyy/mm/dd) Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	Candidate's name as shown on the b	allot			
Municipality Wainfleet Spending Limit General Parties and Other Expressions of Appreciation \$1,277.34 I did not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration I, Brian Grant , declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct. Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	Last Name or Single Name Grant				
Wainfleet Spending Limit General \$12,773.40 Parties and Other Expressions of Appreciation \$1,277.34 Parties and Other Expressions of Appreciation \$1,277.34 Reclaration I, Brian Grant belief that these financial statements and attached supporting schedules are true and correct. Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	Office for Which the Candidate Sough Mayor	nt Election	Ward Name or Nun	nber (if any)	
Parties and Other Expressions of Appreciation \$1,277.34 \$1,277.34 \$8,740.80 I did not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration , declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct. Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate Signature of Clerk or Designate Contributions from Candidate and Spouse \$8,740.80	Municipality Wainfleet				
\$12,773.40 \$1,277.34 \$8,740.80 I did not accept any contributions or incur any expenses. (Complete Boxes A and B only) Box B: Declaration I, Brian Grant , declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct. Signature of Candidate Date (yyyy/mm/dd) Date (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	Spending Limit			Contribution Limit	
Box B: Declaration I, Brian Grant , declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct. Signature of Candidate Date (yyyy/mm/dd) Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate				Candidate and Spouse	
I, Brian Grant , declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct. Signature of Candidate Date (yyyy/mm/dd)	I did not accept any contributions	or incur any expenses. (Co	mplete Boxes A and	B only)	
belief that these financial statements and attached supporting schedules are true and correct. Signature of Candidate Signature of Candidate Signature of Candidate Signature of Clerk or Designate	Box B: Declaration				
Signature of Candidate Date (yyyy/mm/dd) Date (yyyy/mm/dd) Date (yyyy/mm/dd) Date (yyyy/mm/dd) Date (yyyy/mm/dd) Date (yyyy/mm/dd)	I, Brian Grant		, de	eclare that to the bes	st of my knowledge and
Date Filed (yyyy/mm/dd) Time Filed Initial of Candidate or Agent (if filed in person) Signature of Clerk or Designate	belief that these financial statements	and attached supporting sc	hedules are true and	d correct.	
	Signatu	ure of Candidate		2023/03 Date (yyyy	/3/ /mm/dd)
	(3333		te or Agent (if filed in	person) Signatur	e of Clerk or Designate

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)	+ ;	\$	4,523.32		
Revenue from items \$25 or less	+ ;	\$			
Sign deposit refund	+ ;	\$		_	
Revenue from fundraising events not deemed a contribution (from Part III of Schedule 2)	+ 5	\$			
Interest earned by campaign bank account	+ ;	\$		_	
Other (provide full details)					
1.	+ 5	\$			
2.	+ 5	\$		_	
Total Campaign Income (Do not include loan)				= 4	4,523.32 C
EXPENSES (Note: Include the value of contributions of goods and s	ervic	es)			
1. Expenses subject to general spending limit					
Inventory from previous campaign used in this campaign (list details in Table 2 of Schedule 1)	+ 3	\$			
Advertising	+ 5	\$			
Brochures/flyers	+ 5	\$	576.81		
Signs (including sign deposit)	+ 5	\$	2,418.47		
Meetings hosted	+ 5	\$	103.74	_	
Office expenses incurred until voting day	+ 5	\$			
Phone and/or internet expenses incurred until voting day	+ 5	\$		_	
Salaries, benefits, honoraria, professional fees incurred until voting day	+ 5	\$		_	
Bank charges incurred until voting day	+ 5	\$	6.80		
Interest charged on loan until voting day	+ 5	\$		_	
Other (provide full details)					
1.	+ \$	5			
2.	+ \$	5			
3.	+ \$	5		_	
4.	+ \$	5			
5.	+ \$	3			
6.	+ \$	3			
Total Expenses subject to general spending limit	= 9	5	3,105.82	C2	
2. Expenses subject to spending limit for parties and other expression	s of a	appre	eciation		
1.	+ \$				
2.	+ \$				
Total Expenses subject to spending limit for parties and other				-	
expressions of appreciation	= \$	·		C3	

3. Expenses not subject to spending limits

Accounting and audit	+	\$ 1,412.50			
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	+	\$ 5.00			
Interest charged on loan after voting day	+	\$			
Expenses related to recount	+	\$			
Expenses related to controverted election	+	\$			
Expenses related to compliance audit	+	\$	_		
Expenses related to candidate's disability (provide full details)					
1.	+	\$			
Other (provide full details)			_		
1.	+	\$			
2.	+	\$			
Total Expenses not subject to spending limits		\$ 1,417.50	C4		
Total Campaign Expenses (C2 + C3 + C4)	-		= \$	4,523.32	C5
Box D: Calculation of Surplus or Deficit					
Excess (deficiency) of income over expenses (Income minus Total Expenses) (C1 – C5)	+	\$ 	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			= \$		D2

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 Contribution	ns							
Contributions in money from candidate	e and sp	ouse		+ \$	2,	746.51		
Contributions in goods and services from candidate and spouse (include value listed in Table 1 and Table 2)								
Total value of contributions not exceed. Include ticket revenue, contributions where the total contribution from a contribution of the contributions from contributions from contributions.	s in mone	ey, goods and ser or is \$100 or less	vices	+ \$				
Total value of contributions exceeding (from line 1B; list details in Table 3 and Include ticket revenue, contributions where the total contribution from a contribution of the contributions from contribu	d Table 4 s in mone contribute	4) ey, goods and ser or exceeds \$100	vices	+ \$	- 1,	776.81		
Less: Ineligible contributions paid or p	ayable t	o the contributor		- \$				
Contributions paid or payable to from anonymous sources excee			butions	- \$				
Total Amount of Contributions (record	0			= \$	Λ	523.32		
Total Amount of Continuations (record	under mic	onie in Box of		Ψ	,	020.02		
Part II – Contributions from cand	didate c	or spouse						
Table 1: Contributions in goods or	services							
Description of Goods or Services							deceived mm/dd)	Value (\$)
					·		Total	
Additional information is listed on s	eparate	supplementary at	tachmen	it, if complete	ed ma	nually.		
Table 2: Inventory of campaign goo (Note: Value must be recorded as a							d in this o	campaign
Description		Date Acquired (yyyy/mm/dd)	Supplie	er			Quantity	Current Market Value (\$)
							Total	
			. 2				Total	
Additional information is listed on s	eparate	supplementary at	tachmen	it, if complete	ed ma	nually.		
Part III - Contributions exceedin	a \$100	per contributor	– indiv	iduals oth	er tha	an can	didate or	spouse
Table 3: Monetary contributions fro								
Name	Full Ad			Date Rece (yyyy/mm	eived		nount eived (\$)	Amount Returned to Contributor or Paid to Clerk (\$)
Earl Reinink		Lakeshore Road eet, Ontario Can '0		2022/08	/30		1,200.00	

Total nent, if completed ma er than candidate or	spouse	
nent, if completed ma	nually.	
nent, if completed ma	nually.	
	spouse	
		14.1
cription of Goods ervices	Date Received (yyyy/mm/dd)	Value (\$)
rs	2022/10/17	277.12
r Mailout	2022/10/17	299.69
	Total	576.81
	er Mailout ment, if completed ma	

Schedule 2 – Fundraising Events and Activities			
Complete a separate schedule for each event or activity held.	Additional schedule(s) attached,	if completed 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	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 man	ket value)		
1.	+ \$		
2.	+ \$		
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	sold for \$25 or less)		
1.	+ \$		
2.	+ \$		
Total Part III (include under Income in Box C)			= \$
Part IV – Expenses related to fundraising event or activity	y		
Provide details			
1.	+ \$		
2	+ \$		
۷.			
Total Part IV Expenses (include under Expenses in Box C)			= \$

Auditor's Repo	rt – Municipal E	Elections Act, 1996 (S	ection 88.25)	
A candidate who ha	as received contrib	utions or incurred expense	es in excess of \$10,000 must	attach an auditor's report.
Professional Design		CCOUNTANT		
Municipality ST. CATHARINE	S			Date (yyyy/mm/dd) 2023/03/29
Contact Information	on			
Last Name or Single DIPAOLA	e Name		Given Name(s) TONY	Licence Number 1-16665
Address				
Suite/Unit Number	Street Number 69	Street Name ONTARIO STREET		
Municipality ST. CATHARINE	S		Province ONTARIO	Postal Code L2R 5J5
Telephone Number 905-680-8669		Email Address TONY@DDLACCOL	JNTING.COM	

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

✓ Report is attached

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.