

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 paid immediately over to the clerk who is responsible for the conduct of the election.

For the campaign period from (day candidate filed nomination)

| | | |
|------|----|----|
| YYYY | MM | DD |
| 2018 | 07 | 12 |

 to

| | | |
|------|----|----|
| YYYY | MM | DD |
| 2018 | 10 | 22 |

☒ Initial filing reflecting finances to December 31 (or 45 days after voting day in a by-election)

☐ Supplementary filing including finances after December 31 (or 45 days after voting day in a by-election)

Box A: Name of Candidate and Office

Candidate's name as shown on the ballot

Last Name or Single Name

Gray

Given Name(s)

Clinton

Office for which the candidate sought election

Town Council

Ward name or no. (if any)

Municipality

Fort Frances

Spending Limit - General

\$ 9661.40

Spending Limit - Parties and Other Expressions of Appreciation

\$

☐ I did not accept any contributions or incur any expenses. (Complete Boxes A and B only)

Box B: Declaration

I, Clinton Gray, 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)

2019/03/27

Date Filed (yyyy/mm/dd)

2019/03/28

Time Filed

9:50 a.m.

Initial of Candidate or Agent (if filed in person)

CG

Signature of Clerk or Designate

Slomka

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)

+ \$ 864.78

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)

+ \$ _____

1. _____ + \$ _____

2. _____ + \$ _____

3. _____ + \$ _____

4. _____ + \$ _____

5. _____ + \$ _____

Total Campaign Income (Do not include loan)

= \$ 864.78 C1**EXPENSES** (Note: include the value of contributions of goods and services)**Expenses subject to general spending limit**

Inventory from previous campaign used in this campaign (list details in Table 4 of Schedule 1)

+ \$ _____

Advertising

+ \$ 45.20

Brochures/flyers

+ \$ _____

Signs (including sign deposit)

+ \$ 757.10

Meetings hosted

+ \$ _____

Office expenses incurred until voting day

+ \$ 19.48

Phone and/or internet expenses incurred until voting day

+ \$ _____

Salaries, benefits, honoraria, professional fees incurred until voting day

+ \$ _____

Bank charges incurred until voting day

+ \$ 43.00

Interest charged on loan until voting day

+ \$ _____

Other (provide full details)

+ \$ _____

1. _____ + \$ _____

2. _____ + \$ _____

3. _____ + \$ _____

4. _____ + \$ _____

5. _____ + \$ _____

Total Expenses subject to general spending limit

= \$ 864.78 C2**EXPENSES****Expenses subject to spending limit for parties and other expressions of appreciation**

1. _____ + \$ _____

2. _____ + \$ _____

3. _____ + \$ _____

4. _____ + \$ _____

5. _____ + \$ _____

Total Expenses subject to spending limit for parties and other expressions of appreciation

= \$ _____ C3

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 | + \$ | |
| 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 | = \$ | C4 |

Total Campaign Expenses (C2 + C3 + C4)**= \$ 864.78 C5****Box D: Calculation of Surplus or Deficit**

| | | | |
|---|-------------|--------------|-----------|
| Excess (deficiency) of income over expenses (Income minus Total Expenses) (C1 – C5) | + \$ | 0 | D1 |
| Eligible deficit carried forward by the candidate from the last election (applies to 2018 regular election only) | - \$ | 0 | D2 |
| Total (D1 – D2) | = \$ | 0 | |
| If there is a surplus, deduct any refund of candidate's or spouse's contributions to the campaign | - \$ | 0 | |
| Surplus (or deficit) for the campaign | = \$ | 0 | D3 |

If line D3 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.

Part I – Summary of Contributions

+ \$ 194.78

+ \$

+ \$ 220.00

- + \$ 450,00

- \$

- \$

= \$ 864.78 1A

Total Amount of Contributions (record under Income in Box C)

Table 1: Monetary contributions from individuals other than candidate or spouse

| Name | Full Address | Date Received | Amount Received \$ | Amount \$ Returned to Contributor or Paid to Clerk |
|--|------------------------------|---------------|--------------------|--|
| Rocky Brown | 800 Fifth St West P9A3C7 | 08/13/18 | 200.00 | |
| Natalie Armstrong | 623 Second St East P9A1N6 | 08/13/18 | 150.00 | |
| Marcella Wesley | 1151 Scott St. | 08/13/18 | 100.00 | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <input type="checkbox"/> Additional information is listed on separate supplementary attachment | | | Total | 450.00 |

Table 2: Contributions in goods or services from individuals other than candidate or spouse
(Note: must also be recorded as Expenses in Box C)

| Name | Full Address | Description of Goods or Services | Date Received (yyyy/mm/dd) | Value \$ |
|--|--------------|----------------------------------|----------------------------|----------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <input type="checkbox"/> Additional information is listed on separate supplementary attachment | | | | Total |

Total for Part II - Contributions exceeding \$100 per contributor
(Add totals from Table 1 and Table 2 and record the total in Part 1 - Summary of Contributions) \$ 1B

Part III – Contributions from candidate or spouse

Table 3: Contributions in goods or services

| Description of Goods or Services | Date Received (yyyy/mm/dd) | Value \$ |
|----------------------------------|----------------------------|----------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Description of Goods or Services | Date Received (yyyy/mm/dd) | Value \$ |
|--|-------------------------------|--------------|
| | | |
| <input type="checkbox"/> Additional information is listed on separate supplementary attachment | | Total |

Table 4: Inventory of campaign goods and materials from previous municipal campaign used in this campaign
 (Note: value must be recorded as a contribution from the candidate and as an expense)

| Description | Date Acquired (yyyy/mm/dd) | Supplier | Quantity | Current Market Value \$ |
|--|-------------------------------|----------|----------|----------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <input type="checkbox"/> Additional information is listed on separate supplementary attachment | | | | Total |

Schedule 2 – Fundraising Events and Activities

Fundraising Event/Activity

Complete a separate schedule for each event or activity held

☐ Additional schedule(s) attached

Description of fundraising event/activity _____

Date of event/activity (yyyy/mm/dd) _____

Part I – Ticket revenue

Admission charge (per person)

(If there are a range of ticket prices, attach complete breakdown of all ticket sales)

Number of tickets sold

\$ _____ 2A
X _____ 2B

Total Part I (2A X 2B) (include in Part 1 of Schedule 1)

= \$ _____

Part II – Other revenue deemed a contribution

(e.g. revenue from goods sold in excess of fair market value)

Provide details

| | |
|----------|------------|
| 1. _____ | + \$ _____ |
| 2. _____ | + \$ _____ |
| 3. _____ | + \$ _____ |
| 4. _____ | + \$ _____ |
| 5. _____ | + \$ _____ |

Total Part II (include in Part 1 of Schedule 1)

= \$ _____

Part III – Other revenue not deemed a contribution

(e.g. contribution of \$25 or less; goods or services sold for \$25 or less)

Provide details

| | |
|----------|------------|
| 1. _____ | + \$ _____ |
| 2. _____ | + \$ _____ |
| 3. _____ | + \$ _____ |
| 4. _____ | + \$ _____ |
| 5. _____ | + \$ _____ |

Total Part III (include under Income in Box C)

= \$ _____

Part IV – Expenses related to fundraising event or activity

Provide details

| | |
|----------|------------|
| 1. _____ | + \$ _____ |
| 2. _____ | + \$ _____ |
| 3. _____ | + \$ _____ |
| 4. _____ | + \$ _____ |
| 5. _____ | + \$ _____ |
| 6. _____ | + \$ _____ |
| 7. _____ | + \$ _____ |
| 8. _____ | + \$ _____ |

Total Part IV Expenses (include under Expenses in Box C)

= \$ _____

Auditor's Report*Municipal Elections Act, 1996 (Section 88.25)*

A candidate who has received contributions or incurred expenses in excess of \$10,000 must attach an auditor's report.

Professional Designation of Auditor

| | |
|--------------|-------------------|
| Municipality | Date (yyyy/mm/dd) |
|--------------|-------------------|

Contact Information

| | | |
|--------------------------|---------------|----------------|
| Last Name or Single Name | Given Name(s) | Licence Number |
|--------------------------|---------------|----------------|

| | | |
|----------------|------------|-------------|
| Address | | |
| Suite/Unit No. | Street No. | Street Name |

| | | |
|--------------|----------|-------------|
| Municipality | Province | Postal Code |
|--------------|----------|-------------|

| | |
|-------------------------------------|---------------|
| Telephone No. (including area code) | Email Address |
|-------------------------------------|---------------|

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.



ROYAL BANK OF CANADA
P.O. BAG SERVICE 2650
CALGARY AB T2P 2M7

Business Account Statement

RBBDA30000_4749009 E D 01592 00231

CLINTON D GRAY FORT FRANCES MU NICIPALITY ELECTION
623 SECOND STREET EAST
FORT FRANCES ON P9A 1N6

August 7, 2018 to September 6, 2018

Account number: 01592 100-777-2

How to reach us:

Please contact your RBC Banking representative or call

1-800-Royal®2-0

(1-800-769-2520)

www.rbcroyalbank.com/business

Account Summary for this Period

RBC Business Essentials® Fixed Fee Plan 1

Royal Bank of Canada

343 SCOTT ST, FORT FRANCES, ON P9A 1H1

| | |
|--------------------------------------|------------|
| Opening balance on August 7, 2018 | \$0.00 |
| Total deposits & credits (6) | + 800.00 |
| Total cheques & debits (4) | - 442.13 |
| Closing balance on September 6, 2018 | = \$357.87 |

Account Activity Details

| Date | Description | Cheques & Debits (\$) | Deposits & Credits (\$) | Balance (\$) |
|--------|--|-----------------------|-------------------------|--------------|
| | Opening balance | | | 0.00 |
| 08 Aug | Deposit | | 450.00 | 450.00 |
| 13 Aug | Deposit | | 50.00 | 500.00 |
| 16 Aug | e-Transfer Request Fulfilled fee | 1.50 | | |
| | e-Transfer Request Fulfilled | 401.15 | | 97.35 |
| 20 Aug | Interac purchase - 5154 WAL-MART #5806 | 19.48 | | 77.87 |
| 22 Aug | e-Transfer received DAWSON MIHICHUK | | 20.00 | 97.87 |
| 28 Aug | ATM deposit - WR241876 | | 100.00 | 197.87 |
| 04 Sep | Monthly fee | 20.00 | | 177.87 |
| 06 Sep | ATM deposit - WR217026 | | 20.00 | |



Business Account Statement

August 7, 2018 to September 6, 2018
Account number: 01592 100-777-2

Account Activity Details - continued

| Date | Description | Cheques & Debits (\$) | Deposits & Credits (\$) | Balance (\$) |
|--------|------------------------|-----------------------|-------------------------|--------------|
| 06 Sep | ATM deposit - WR217024 | | 160.00 | 357.87 |
| | Closing balance | | | 357.87 |

Account Fees: \$21.50



ROYAL BANK OF CANADA
P.O. BAG SERVICE 2650
CALGARY AB T2P 2M7

Business Account Statement

RBBDA30000_5450965 E D 01592 00879
CLINTON D GRAY FORT FRANCES MUNICIPALITY ELECTION
623 SECOND STREET EAST
FORT FRANCES ON P9A 1N6

September 6, 2018 to October 5, 2018

Account number: 01592 100-777-2

How to reach us:

Please contact your RBC Banking representative or call
1-800-Royal@2-0
(1-800-769-2520)
www.rbcroyalbank.com/business

Account Summary for this Period

RBC Business Essentials® Fixed Fee Plan 1

Royal Bank of Canada

343 SCOTT ST, FORT FRANCES, ON P9A 1H1

| | |
|--------------------------------------|------------|
| Opening balance on September 6, 2018 | \$357.87 |
| Total deposits & credits (0) | + 0.00 |
| Total cheques & debits (3) | - 377.45 |
| Closing balance on October 5, 2018 | = -\$19.58 |

Account Activity Details

| Date | Description | Cheques & Debits (\$) | Deposits & Credits (\$) | Balance (\$) |
|--------|----------------------------------|-----------------------|-------------------------|--------------|
| | Opening balance | | | 357.87 |
| 07 Sep | e-Transfer Request Fulfilled fee | 1.50 | | |
| | e-Transfer Request Fulfilled | 355.95 | Second set of signs | 0.42 |
| 01 Oct | Monthly fee | 20.00 | | -19.58 |
| | Closing balance | | | -19.58 |

Account Fees: \$21.50

Corporate Graphics
T-Bay
Did not receive
invoice



Print | Close

Interac⁺ e-Transfer Completed

Your *Interac*⁺ e-Transfer has been sent.

The funds are directly credited to the recipient's account. No further action is required.

Confirmation Number : 2963

Date and Time : 16 Aug 2018 at 18:24:12 EDT

Requested By : CORPORATE GRAPHICS NORTHWEST INC.

Requested Amount : \$401.15

From : Chequing 01592-1007772

New Balance : 98.85

Message to Requester : Thank you for the signs



Important Information

Once processed, your transfer will appear under Payment History. You can check the status of your *Interac* e-Transfer in the Payment History Details.

Notification of any incomplete *Interac* e-Transfer will be delivered to your Message Centre.

CORPORATE GRAPHICS NORTHWEST INC.

370 FORT WILLIAM ROAD
THUNDER BAY, ONTARIO P7B 2Z3
CANADA

INVOICE

Invoice No.: 21447
Date: 08/17/18
Ship Date:
Page: 1
Re: Order No.

Sold to:
Miscellaneous

Ship to:
Clinton Gray

Business No.: 122202708RP0001

| Quantity | Unit | Description | Tax | Unit Price | Amount |
|------------------------------|------|---|-----|---------------|--------|
| | | x30 double sided election signs with H stands WO#21626 | H | | 355.00 |
| | | H - HST HST | | | 46.15 |
| Shipped By: Tracking Number: | | | | Total Amount | 401.15 |
| Comment: | | | | Amount Paid | 0.00 |
| Sold By: | | | | Amount Owning | 401.15 |

Invoice

Fort Frances Times Limited

116 First Street East
Fort Frances, ON
P9A 1K2

Phone: (807) 274-5373

Fax: (807) 274-7286

Clinton Gray
Fort Frances, ON

Acct #: 04306988

Ad #: 00146185

Phone:

Date: 10/05/2018

Ad Taker: JP

Salesperson: JP

Sort Line: Fire Prevention Week Page.

Ad Notes: To promote Clinton's Council candidacy.

| Description | Total |
|---------------------|-------|
| 01 Times 10/10/2018 | 40.00 |

HST # 10185 1400 RT

Total: 40.00

Tax: 5.20

Net: 45.20

Prepaid: null

Total Due 45.20

Rules and regulations apply. See contest rules for details.

Walmart*

WAL*MART
WE SELL FOR LESS
807-274-1373
FORT FRANCES, ONT. CANADA
ST# 05806 DP# 001988 TE# 68 TR# 04243
SALES ORDER 006977525051 \$3.27 J
EXPFILE 007897327930 \$13.97 J
SUBTOTAL \$17.24
HST 13% \$2.24
TOTAL \$19.48
DEBIT TEND \$19.48
CHANGE DUE \$0.00
GST/HST 137466199 RT 0001
QST 1016551356 TQ 0001

TRANSACTION RECORD PURCHASE
19.48

CHEQUING ***** 7862 I 3
RRN # 001001625
AUTH # 005154
TERMINAL ID WMTJCJ018872
00 APPROVED-THANK YOU

INTERAC
AID A0000002771010
TC 351061909B2B6C02
*PIN VERIFIED

08/17/18 20:29:52

ITEMS SOLD 2

TC# 4989 8266 6211 5572 5095



New Thursday flyer start date
Circulaire maintenant en vigueur Jeudi
08/17/18 20:29:57

GENERAL CASH RECEIPT

Times
FORT FRANCES
AND RAINY LAKE HERALD

Oct 5/18

No 45558

Received from W. H. H. H.
the sum of Forty-Five Dollars

| | |
|-----|-------|
| NET | 45.00 |
| HST | 5.20 |

for Thank You per Michael
FORT FRANCES TIMES LIMITED

FORT FRANCES TIMES LIMIT
116 FIRST ST E
FORT FRANCES, ON P9A 1K
807-274-5373

DEBIT SALE

REF#: 000000009
Batch #: 019 RRN: 000464021005
10/05/18 10:53:22
APPR CODE: 008972
Trace: 9
DEBIT/CHEQUING Chip
*****8959

AMOUNT \$45.20

APPROVED - 00

INTERAC
AID: A0000002771010
TVR: 80 80 00 80 00
TSI: 68 00

THANK YOU / MERCI
CUSTOMER COPY

| | | | | | | | | | |
|----|--|--|--|--|-------|--|--|--|--|
| 9 | | | | | 34 | | | | |
| 10 | | | | | 35 | | | | |
| 11 | | | | | 36 | | | | |
| 12 | | | | | 37 | | | | |
| 13 | | | | | 38 | | | | |
| 14 | | | | | 39 | | | | |
| 15 | | | | | 40 | | | | |
| 16 | | | | | 41 | | | | |
| 17 | | | | | 42 | | | | |
| 18 | | | | | 43 | | | | |
| 19 | | | | | 44 | | | | |
| 20 | | | | | 45 | | | | |
| 21 | | | | | 46 | | | | |
| 22 | | | | | 47 | | | | |
| 23 | | | | | 48 | | | | |
| 24 | | | | | 49 | | | | |
| 25 | | | | | 50 | | | | |
| | | | | | TOTAL | | | | |

| | | | | |
|--|-------------|-------------------|------------------------------|--------------------------------|
| NOM <u>Compo Gm</u> DATE <u>02/13/18</u> ADRESSE <u>Fort Frances</u> ADDRESS | | | | |
| VENDEUR PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTÉ AMOUNT FWD. |
| 1 | | Donation Cash | | 50.00 |
| 2 | | | | |
| 3 | | TOFF Council | | |
| 4 | | Nominee | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° D'ENR DE TAXE TAX REG. NO | | | | |
| 01 | | | TOTAL | 50.00 |
| | | | SIGNATURE <u>[Signature]</u> | |

13 Ct

DATE 08/18/12

NOM NAME Mark Kerber

ADRESSE ADDRESS Fort Frances

| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTÉ AMOUNT FWD |
|--------------------------------|-------------|-------------------|-----------------------|-------------------------------|
| 1 | | Donation Cash | | 50 ⁰⁰ |
| 2 | | | | |
| 3 | | ToFF Coun. | | |
| 4 | | Nominee | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° D'ENR DE TAXE TAX REG NO | | | | |
| 03 | | TOTAL | | 50 ⁰⁰ 08 |
| | | SIGNATURE | | |

| | | | |
|--|---------------|-------------------|------------------------------------|
| DATE <u>08/13/10</u> | | | |
| NOM NAME <u>Kirk & Tracy Armstrong</u> | | | |
| ADRESSE ADDRESS <u>Fort Frances ON</u> | | | |
| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTE ON ACCOUNT <u>1/</u> |
| | | | MONTANT REPORTE AMOUNT FWD. |
| 1 | Donation Cash | | 50.00 |
| 2 | | | |
| 3 | TOP CORAL | | |
| 4 | NOMER | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 D'ENR. DE TAXE TAX REG. NO | | | |
| 04 | | | TOTAL 50.00 |
| SIGNATURE <u>[Signature]</u> | | | |

| | | | | |
|-----------------------------|-----------------|-------------------|-----------------------|--------------------------------|
| DATE <u>08/13/18</u> | | | | |
| NOM <u>RB Rock Brown</u> | | | | |
| ADRESSE <u>Fruit Fiches</u> | | | | |
| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTE AMOUNT FWD. |
| 1 | Donation Cheque | | | 200 ⁰⁰ |
| 2 | | | | |
| 3 | TOFF Carol | | | |
| 4 | Nominee | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° D'ENR. DE TAXE | | | | |
| TAX REG. NO. | | | | |
| 05 | | TOTAL | | 200 ⁰⁰ |
| | | SIGNATURE | | <i>[Signature]</i> |

| | | | | |
|-------------------------------|-------------|-------------------|-----------------------|--------------------------------|
| NOM NAME | | DATE 08/13/18 | | |
| ADRESSE ADDRESS | | Fort Frances | | |
| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTÉ AMOUNT FWD. |
| 1 | | Donation Cash | | 100 ⁰⁰ |
| 2 | | | | |
| 3 | | TUFF Council | | |
| 4 | | Nominée | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N D'ENR DE TAXE TAX REG NO | | | | |
| 06 | | TOTAL | | 100 ⁰⁰ |
| | | SIGNATURE | | |

| | | | | |
|-------------------------------------|---------------|-------------------|---|--------------------------------|
| DATE <u>08/12/18</u> | | | | |
| NOM NAME <u>Stephen Daniels</u> | | | | |
| ADRESSE ADDRESS <u>Fort Frances</u> | | | | |
| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT <input checked="" type="checkbox"/> | MONTANT REPORTÉ AMOUNT FWD. |
| 1 | Donation Cash | | | 50.00 |
| 2 | | | | |
| 3 | TOFF Council | | | |
| 4 | Donnee | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° DENR DE TAXE TAX REG NO | | | | |
| 07 | | TOTAL | | 50.00 |
| | | SIGNATURE | | <u>[Signature]</u> |

| | | | | |
|-------------------------------------|------------|------------------------|-------------------------|--------------------------------|
| DATE <u>Aug 21/19</u> | | | | |
| NOM NAME <u>Duquenois, Michel</u> | | | | |
| ADRESSE ADDRESS <u>Fort Frances</u> | | | | |
| VENDEUR PAR SOLD BY | C/R COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTE AMOUNT FWD. |
| 1 | | Abonnement 2-Trimestre | | \$20.00 |
| 2 | | | | |
| 3 | | | | |
| 4 | | 10 Off. Council | | |
| 5 | | Nov. 1988 | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° D'IMP. DE TAXE TAX REG. NO. | | | | |
| 08 | | TOTAL | | \$20.00 |
| | | SIGNATURE | <u>Michel Duquenois</u> | |

| | | | | |
|-------------------------------|-------------|-------------------|-----------------------|-------------------------------|
| DATE <u>SEP 6/10</u> | | | | |
| NOM <u>Abdulla Almusallam</u> | | | | |
| ADRESSE <u>Foul Fawad</u> | | | | |
| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTE AMOUNT FWD |
| 1 <u>Diamond Cash</u> | | | | <u>450.00</u> |
| 2 | | | | |
| 3 <u>TOFF Cash</u> | | | | |
| 4 <u>Monnaie</u> | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° D'ENR. DE TAXE | | | | |
| TAX REG. NO | | | | |
| 09 | | | TOTAL | <u>500.00</u> |
| | | | SIGNATURE | <u>[Signature]</u> |

| | | | | |
|---|-------------|-------------------|-----------------------|-------------------------------|
| DATE <u>Sept 6/18</u> NOM <u>Clinton Group Inc</u> ADRESSE <u>Paris France</u> ADDRESS | | | | |
| VENDU PAR SOLD BY | C.R. COD | A PAYER CHARGE | ACOMPTÉ ON ACCOUNT | MONTANT REPORTE AMOUNT FWD |
| 1 <u>Denting Cash</u> | | | | <u>130.00</u> |
| 2 | | | | |
| 3 <u>TOFF Civil</u> | | | | |
| 4 <u>House</u> | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| N° D'ENR DE TAXE | | | | |
| TAX REG NO | | | | |
| 10 | | | TOTAL | <u>130.00</u> |
| | | | SIGNATURE | <u>[Signature]</u> |

 **Blueline** G3NCR.2B LIVRET DE VENTE - SALES BOOK

| | | | |
|--|---------------------|----------------------|--------------------------------|
| DATE 09/13/18 | | | |
| NOM NAME Marcella Wesley | | | |
| ADRESSE ADDRESS Fort Frances | | | |
| VENDU PAR SOLD BY | C.R. COD | À PAYER CHARGE | ACOMPTE ON ACCOUNT |
| | | | MONTANT REPORTÉ AMOUNT FWD. |
| 1 | Cash | | 100⁰⁰ |
| 2 | | | |
| 3 | TOFF Council | | |
| 4 | Nominee | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| N° D'ENR. DE TAXE TAX REG. NO. | | | |
| 12 | | TOTAL | 100⁰⁰ |
| | | SIGNATURE clt | |