

List of contributors and return of expenses

Municipalities with a population of under 5,000

1. Candidate's personal information		
Name of municipality	Election date <div> <div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> <div></div> </div> </div> <div> <div>YYYY</div> <div>MM</div> <div>DD</div> </div>	
Given name and surname of the candidate	<input type="checkbox"/> Municipal office	
Name of recognized ticket (where applicable)	<input type="checkbox"/> Seat number: _____	
Candidate's domiciliary address		
_____	_____	_____
Civic number	Roadway	Apt.
_____		_____
City, town or municipality		Postal code
Telephone number		
_____	_____	_____
Home	Cell	Work
Email address		

2. Declaration of a candidate having received no gifts and having incurred no expenses		
<p>I declare that I have not received any gifts, that I have not contributed to my own election campaign and that I have not incurred any expenses.</p>		
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Candidate's signature	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Name (please print)	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Date

Acknowledgement of receipt (reserved for the treasurer of the municipality)

The treasurer should complete this section when the candidate submits the form. I hereby acknowledge receipt of the form titled *List of contributors and return of expenses* signed by the candidate whose personal information appears in section 1.

Treasurer's signature

Date

Reminder: The treasurer is required to provide the candidate with a copy of this form.

3. Contributors

CANDIDATE

Given name and surname	Gifts (\$)
Equal to the total amount that a candidate can pay out of their own property to promote their election (maximum amount: \$1,000)	A

CONTRIBUTORS OF GIFTS OF \$50 OR LESS

	Gifts (\$)
Total amount of gifts of \$50 or less	
	B

CONTRIBUTORS HAVING MADE ONE OR MORE GIFTS TOTALLING OVER \$50

Given name and surname	Address	Municipality	Payment method	Gifts (\$)

No contributor may give more than \$200

Total

C

Total gifts from the candidate
and contributors

A + B + C

4. Return of expenses

No.	Supplier's name and address	Description of good or service	Amount paid
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Total expenses:**\$****5. Declaration of a candidate having incurred expenses**

All information entered in this form is true, accurate and complete.

Candidate's signature_____
Name (please print)_____
Date