



Election Finances Division

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Elections Ontario
Election Finances Office

TPAR-1 Third Party Election Advertising Report

Disponible aussi en français.

AMENDED

Third Party			
Name:	National Citizens Coalition		
Business Tel.:	416-869-3838	Home Tel.:	
Fax:	416-869-1891	Email:	ncc@nationalcitizens.ca
Address:	27 Queen St E Suite 501		
City:	Toronto	Postal Code:	M5C 2M6
Chief Financial Officer			
First Name:	Miriam	Last Name:	Alford
Business Tel.:	416-869-3838	Home Tel.:	
Fax:	416-869-1891	Email:	malford@ncc-on.org
Address:	27 Queen St E Suite 501		
City:	Toronto	Postal Code:	M5C 2M6

Statement of Income and Expenses		
Income		
Line 001	Contributions (from Schedule 1)	35,708.00
Line 002	TP's own funds (from Schedule 1)	23,201.00
Line 003	Total Income for Third Party Election Advertising Purposes	0
Expenses		
Line 004	Total Third Party Election Advertising Expenses (from Schedule 4)	23,201.00
<input type="checkbox"/> In accordance with subsection 37.12 (3), EFA, I/we report that no third party election advertising expenses were incurred.		

Certification of Chief Financial Officer

I, Miriam Alford (Name of Chief Financial Officer), have prepared this statement of income and expenses for third party election advertising purposes as set out herein for National Citizens Coalition (Name of TP) and hereby certify that to the best of my knowledge and belief the statements and supporting schedules are true and correct.

Miriam Alford Signature of Chief Financial Officer March 3, 2008 Date

Certification of Third Party Principal Officer

I, PETER CULMAN (Name TP/Official), certify that to the best of my knowledge and belief the statement and supporting schedules as set out herein are true and correct.

Peter Culman Signature of Third Party Principal Officer March 3, 2008 Date



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Auditor's Report

To Miriam Alford (Name of CFO), Chief Financial Officer for National Citizens Coalition Inc (Name of TP), Third Party.

I/(We) have audited the Statement of Election Advertising Income and Expenses of National Citizens Coalition Inc (TP), under the requirements of subsection 37.12 of the *Election Finances Act* for the election held on October 10th 2007 (election date). This financial information is the responsibility of the Chief Financial Officer of National Citizens Coalition Inc (TP). My (our) responsibility is to express an opinion on this financial information based on my audit.

Except as explained in the following paragraph, I (we) conducted my (our) audit in accordance with Canadian generally accepted auditing standards. Canadian generally accepted auditing standards require that I (we) plan and perform an audit to obtain reasonable assurance whether the financial information is free of material misstatement. An audit also includes assessing the accounting principles used and significant estimates made by the CFO, as well as evaluating the overall financial statement presentation. The Act, however, does not require me (us) to report, nor was it practicable for me (us) to determine, that contributions reported included only those which may be properly retained in accordance with the provisions of the Act.

Due to the nature of the types of transactions inherent in any election campaign, the completeness of the various categories of income and expenses is not susceptible of satisfactory audit verification. Accordingly, my (our) verification of income and expenses was limited to the amounts recorded in the third party election advertising records and I (we) was (were) not able to determine whether any adjustments might be necessary to income and expenses.

In my (our) opinion, except for the effect of adjustments, if any, which I (we) might have determined to be necessary had I (we) been able to satisfy myself concerning the completeness of advertising income and expenses referred to in the preceding paragraph, this Statement presents fairly, in all material respects, the Advertising Income and Expenses of the National Citizens Coalition Inc (TP) for the election held on October 10th 2007 (election date) in accordance with the accounting requirements of *Election Finances Act* and the guidelines issued by the Chief Electoral Officer.

This financial information is solely for the information and use of the Chief Electoral Officer to comply with subsection 37.12 *EFA*. This financial information is not intended to be and should not be used by anyone other than the specified users or for any other purpose.

Svenest - Szwarcentschik CPA
Signature of Auditor
Licensed Public Accountant

March 7, 2008
Date

Comments:

Auditor

First Name: Nick

Last Name: Szwarcentschik

Professional Designation: CA CGA

License No.: 300484

Firm Name: Svenest & Szwarcentschik LLP

Business Tel.: (416) 779-7044

Fax: (416) 779-8482

Email: nick@szwarcentschik.ca

Address: 43 Colborne St, #10

City: Toronto

Postal Code: M5E 1B4

Contact Person (if different from above)

First Name:

Last Name:



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NCC

Schedule 3: Details of Contributions of over \$100 Accepted for Election Advertising Purposes

Reporting Period from: July 10 2007 to: January 10 2008
(Date 2 months prior to the date the writ is issued) (Date 3 months after polling day)

Important: Where contributions over \$100 for election advertising purposes cannot be identified, then, in accordance with subsection 37.12 (5), EFA, report the details of all contributions over \$100 accepted for the period of _____ (two months prior to the issuing of the writ) to _____ (three months after polling day).

Instructions:

- Include contributor's full legal name, such as Inc., Corp., Ltd.;
- Addresses must include all location information, including city and postal code;
- Select contribution type A for cash, cheque, money order, or credit card;
- Select contribution type B for goods, services, or advertising.
- Record the amount of the contribution under the contributor class column that corresponds to the contributor.

Contributor Full Name	Full Address	Contribution Type	Contributor Class		
			Individual	Corporation	Trade Union
PETE BEERDA		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
MIKE FULLER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	1000		
WALTER THUR		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	500		
MILOS KRATNY		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	125		
RICHARD H. BROCKHOUS		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	135		
ROBERT F. RICHARDS		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
JAMES HOLMES		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DAVID MEADOWELL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
MICHAEL MILLER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
ROSS RIGNEY		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
TEROME J. KNAP		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
PETE BEERDA		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
BRUCE WARNER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	185		
NORMAN SANDHAM		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
DON BRILLINGER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	100		
MIKE TANDY		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
BRYAN HADYETT		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
KURT H. CUNNINGHAM		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	500		
LOK SWENGER SR		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
Subtotals:			4995.00		
Total amount of contributions more than \$100.00.			4995.00		
Totals:					

(Attach supplementary list if required.)



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Instructions:

- Include contributor's full legal name, such as Inc., Corp., Ltd.;
- Addresses must include all location information, including city and postal code;
- Select contribution type A for cash, cheque, money order, or credit card;
- Select contribution type B for goods, services, or advertising.
- Record the amount of the contribution under the contributor class column that corresponds to the contributor.

Contributor Full Name	Full Address	Contribution Type	Contributor Class		
			Individual	Corporation	Trade Union
MR. J. BERGER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DR. C.R. CRAIGS		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
MR. CHRIS MAGILL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	500		
ROSE KOVAL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DANIEL KOETSIER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	500		
BLAKE GILMORE		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	500		
LEONARD EISEN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	1000		
DON ARNOLD MORRISON		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
MARIE SCHACHENSKI		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
MR. E.P. CARROLL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
REG. C. HUNTER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
TIM R. HOWSON		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
DAVID E. HAMBER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
TIM BEHARD		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DALTON S. PURD		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
ROBERT RUMZIMAN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
PAUL ROCKEL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DOUG. HOOK		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
ROSS H. DEAN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
Subtotals:			6000.00		
Total amount of contributions more than \$100.00.			6000.00		
Totals:					

(Attach supplementary list if required.)



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Instructions:

- Include contributor's full legal name, such as Inc., Corp., Ltd.;
- Addresses must include all location information, including city and postal code;
- Select contribution type A for cash, cheque, money order, or credit card;
- Select contribution type B for goods, services, or advertising.
- Record the amount of the contribution under the contributor class column that corresponds to the contributor.

Contributor Full Name	Full Address	Contribution Type	Contributor Class		
			Individual	Corporation	Trade Union
LARRY OLNEY		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
JOHN ROZEMA		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	536		
MONICA LOWRY		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
KENNETH HILBORN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	600		
STEVEN PHILPOTT		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
ALAN SIMPSON		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
JAMES MILLER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
GERRY HATCH		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	500		
DAVID BLANK		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	300		
BARRY G. MARTIN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
ALBERT EVEREST		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
BAIRD JONES		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
JACK J. VERDILYN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
JAMES LATWOOD		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
G. WAYNE CONNER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
DAVID POWELL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
EVELYN RICHARDS		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
SARBITT OHILON		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
MARK ZAVITZ		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
		Subtotals:	4736		
Total amount of contributions more than \$100.00.			4736.00		
		Totals:			

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NEC

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(Date 2 months prior to the date the writ is issued) (Date 3 months after polling day)

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Instructions:

- Include contributor's full legal name, such as Inc., Corp., Ltd.;
- Addresses must include all location information, including city and postal code;
- Select contribution type A for cash, cheque, money order, or credit card;
- Select contribution type B for goods, services, or advertising.
- Record the amount of the contribution under the contributor class column that corresponds to the contributor.

Contributor Full Name	Full Address	Contribution Type	Contributor Class		
			Individual	Corporation	Trade Union
GLENYCE SNELL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
WARREN JACK		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	250		
PETER STRAHLENDOR		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
SIMON KOTSCH		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
DONALD WARD		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
GLEN KINGSWOOD		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	135		
JACK McQUAIG		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
BILL COYLE		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
JAMES A AIKEN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	300		
ANDY SPRIET		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
STEPHEN G CAUDWELL		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	1000		
NOVA D FISHER		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
JIM D CHARLIN		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	2000		
GLEN HENDERSON		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	150		
JOHN T CONNOR		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DAVID KLBT		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	1000		
ALBERT F BURGESS		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
DILLON DUNNING		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	200		
KEITH B REED		<input checked="" type="checkbox"/> A <input type="checkbox"/> B	135		
Subtotals:			6970.00		
Total amount of contributions more than \$100.00.			6970.00		
Totals:					

(Attach supplementary list if required.)

