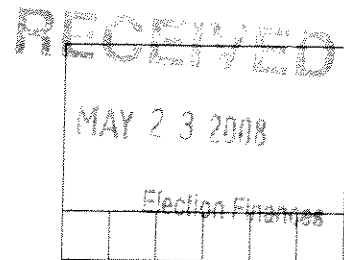




### Election Finances Division

51 ROLARK DRIVE  
TORONTO, ONTARIO M1R 3B1

Telephone: (416) 325-9401  
Toll Free: 1-866-566-9066  
FAX: (416) 325-9466




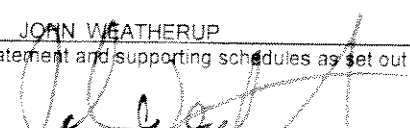
### TPAR-1 Third Party Election Advertising Report

Disponible aussi en français.

<b>Third Party</b>	
Name: JOHN WEATHERUP , LOCAL 4400 CUPE	
Business Tel.: 416-393-0440	Home Tel.: 416-902-9266
Fax: 416-393-0456	Email: john.weatherup@cupe4400.org
Address: 200 – 1482 Bathurst St	
City: TORONTO	Postal Code: M5P 3H1
<b>Chief Financial Officer</b>	
First Name:	Last Name: CIANCONE
Business Tel.: 416-393-0440	Home Tel.: 416-894-4480
Fax: 416-393-0456	Email: tom.ciancone@cupr4400.org
Address: 200 – 1482 Bathurst St	
City: TORONTO	Postal Code: M5P 3H1

<b>Statement of Income and Expenses</b>	
<b>Income</b>	
Line 001 Contributions (from Schedule 1) .....	
Line 002 TP's own funds (from Schedule 1) .....	
Line 003 Total Income for Third Party Election Advertising Purposes .....	NIL
<b>Expenses</b>	
Line 004 Total Third Party Election Advertising Expenses (from Schedule 4) .....	\$ 35,276.64
<input type="checkbox"/> In accordance with subsection 37.12 (3), EFA, I/we report that no third party election advertising expenses were incurred.	

<b>Certification of Chief Financial Officer</b>	
I, <u>TOM CIANCONE</u> (Name of Chief Financial Officer), have prepared this statement of income and expenses for third party election advertising purposes as set out herein for <u>LOCAL 4400, CUPE</u> (Name of TP) and hereby certify that to the best of my knowledge and belief the statements and supporting schedules are true and correct.	
	20 May 2008
Signature of Chief Financial Officer	Date

<b>Certification of Third Party Principal Officer</b>	
I, <u>JOHN WEATHERUP</u> (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.	
	20 May 2008
Signature of Third Party Principal Officer	Date



# TPAR-1 Third Party Election Advertising Report

Disponible aussi en français.

## Auditor's Report

To Tom Ciancone (Name of CFO), Chief Financial Officer for Local 4400 CUPE (Name of TP), Third Party:

I/(We) have audited the Statement of Election Advertising Income and Expenses of Local 4400 CUPE (TP), under the requirements of subsection 37.12 of the *Election Finances Act* for the election held on 10 October 2007 (election date). This financial information is the responsibility of the Chief Financial Officer of Local 4400 CUPE (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 Local 4400 CUPE (TP) for the election held on 10 October 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.

Signature of Auditor

Licensed Public Accountant

Date

May 22, 2008

### Comments:

### Auditor

First Name: Gary

Last Name: Porter

Professional Designation:

CA

CGA

License No.: 1-17202

Firm Name: G.A. Porter Chartered Accountant

Business Tel.: 416 596 9414

Fax: 416 596 9440

Email: gporter@porterhetu.com

Address: 820 - 439 University Ave

City: Toronto

Postal Code: M5G 1Y8

### Contact Person (if different from above)

First Name:

Last Name:



**TPAR-1 Third Party Election Advertising Report**  
 Disponible aussi en français.

**Schedule 1: Statement of Contributions Accepted for Third Party Election Advertising Purposes**

Reporting Period from: 10 July 2007 (Date 2 months prior to the date the writ is issued)		to: 10 January 2008 (Date 3 months after polling day)		
Contributor Class	Monetary	Goods and Services	Loans (unpaid, from Schedule 2)	Totals
Individual				
Trade Unions				
Corporations				
<b>Total:</b>				
Amount of TP's own funds used for election advertising purposes .....				NIL

**Schedule 2: Details of Contributions Received for Election Advertising Purposes — Schedule of Operating Loans**

**Instructions:**

- Record each loan separately.
- Address must include street, city, province/territory, and postal code;
- Select Contributor Class **A** for individuals;
- Select Contributor Class **B** for corporations;
- Select Contributor Class **C** for trade unions;

Lender Name	Full Address	Contributor Class	Loan Date (Y M D)	Principal	Amount Repaid	Balance Owing
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
<b>Totals:</b>						
<b>Total Balance Owing:</b>						NIL
<i>(Carry forward to contributions on Schedule 1)</i>						



