



# UVSS elections expense allowance form

**Please return this form to the Elections office, SUB B211 during office hours and by the time polls close. Electronic copies will not be accepted.**

All expenses incurred during the course of campaigning **must** be declared on this form. A receipt is required for all external expenditures. Include receipts in an envelope and attach to this form. You must declare the fair market value of all donated items and they will be included in a candidate's spending limit. You must submit an expense form even if you do not spend any money (write \$0.00 for the totals).

<b>1) Candidate information</b> (only if you are a candidate for the UVSS Board of Directors)	
<b>Candidate name:</b>	
<b>Slate name (if applicable):</b>	
<b>Position Contested:</b>	

<b>2) Referendum side information</b> (only if you are a referendum proponent or opponent)	
<b>Candidate name:</b>	
<b>Referendum side:</b>	

<b>3) Internal expenditures</b> (expenditures at ZAP copy using a candidates \$30 ZAP credit)			
<b>Description</b>	<b>Place of purchase</b>	<b>Quantity</b>	<b>Total Cost</b>
Printing- Posters	ZAP Copy		
Printing- Banners	ZAP Copy		
	ZAP Copy		
	ZAP Copy		
	ZAP Copy		
	ZAP Copy		
<b>Total Internal Expenditures:</b>			<b>a)</b>

<b>4) External expenditures (expenditures paid by the candidate or slate)</b>			
<b>Description</b>	<b>Place of purchase</b>	<b>GST</b>	<b>Total Cost</b>
Total External Expenditures (excluding GST)			
GST paid on External Expenditures:			
Total External Expenditures:			b)

<b>5) Donated goods or materials</b>			
<b>Description</b>	<b>Donor name or organization</b>	<b>Quantity</b>	<b>Fair Market Value</b>
Total Fair Market Value of donated goods or materials:			c)

<b>6) Total Expenditures</b>	
Total of a), b), and c)	

*If this amount is greater than \$25.00, a reimbursement cheque made out to the candidate will be available for pickup at the General Office the second Friday after polls close.*

<b>7) Candidate Declaration</b>	
I hereby declare that to the best of my knowledge all information in this form is complete and accurate. I understand that financial non-compliance serves as grounds for immediate disqualification.	
Candidate Signature	
Date and Time of Submission	

(Section below to be completed by the UVSS elections office)

Received at \_\_\_\_\_ by \_\_\_\_\_  
(Time of receipt) (Name of elections officer)