



Canada Revenue
Agency

Agence du revenu
du Canada

OTTAWA ON K1A 0L5

**REGISTERED CANADIAN AMATEUR
ATHLETIC ASSOCIATION INFORMATION
RETURN**

000009

CANADIAN SOCCER ASSOCIATION
MANAGER OF FINANCE
237 METCALFE STREET
OTTAWA ON K2P 1R2

Return for Fiscal Period Ending		
Year	Month	Day
2013	12	31
Is this the first return filed by this association? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "No", has the fiscal period changed from the last return filed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is this the final return to be filed by this association? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "Yes", please attach an explanation.		



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If the name or address shown above is incorrect or a more permanent address can be provided, print the necessary corrections below:

Corrected name

Corrected address (Number, Street, Apt. No., P.O. Box or R.R. No.)

City

Province or territory

Postal code

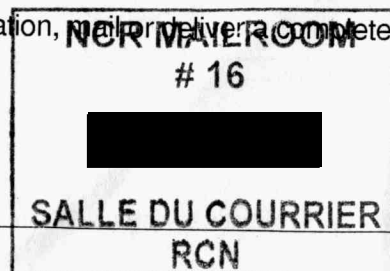
NOTE:

To minimize the possibility of the annual mailing of the personalized Registered Canadian Amateur Athletic Association Information Return going astray, it is important that, where possible, a permanent mailing address be provided (i.e., address of the actual, physical location of the association or permanent P.O. Box number).

Instructions

1. Ensure that the name and address are correct. To correct pre-printed information on this form, please use the area provided. Any changes (except to the contact information above) must be explained in an attachment to this return.
2. Complete the boxes (above right) to indicate the end of the association's fiscal period.
3. Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of revenue and expenditures for the fiscal period and a statement of assets and liabilities as of the end of the fiscal period. The statements should indicate the different sources of revenue in sufficient detail to show how funds were spent or invested.
4. Attach a list of the names, addresses, and occupations or lines of business of the association's current directors.
5. Attach a list of the names and the official positions of the people who are authorized to issue official receipts for the association.
6. Attach a note that fully explains what replacement procedure is followed in the event of lost or spoiled receipts.
7. Within six months from the end of the fiscal period of the association, mail or deliver completed return and all required documents to:

Charities Directorate
Canada Revenue Agency
Ottawa ON K1A 0L5



Information Required

1. Have any changes not previously reported been made in the association's governing documents? If yes, please attach a certified copy of the changes. Yes ☒ No ☐
2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If no, please attach an explanation. Yes ☒ No ☐
3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 155.00
4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration Number? If no, please attach an explanation. Yes ☒ No ☐
5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If yes, please attach an explanation. Yes ☐ No ☒
6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If yes, please attach a list of these gifts and their value as shown on the official donation receipt. Yes ☐ No ☒
7. Has any amount donated to the association been returned to the donor during the year? If yes, please attach an explanation. Yes ☐ No ☒
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If yes, please attach an explanation. Yes ☐ No ☒
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes ☐ No ☒

Certification

To be signed by two directors of the association

1. I, SEAN HEFFERNAN of [REDACTED]
Name of director whose signature appears below. (Print) Address
2. I, FRANCINE MERITE of [REDACTED]
Name of director whose signature appears below. (Print) Address

HEREBY CERTIFY that the information given in this return and in all statements attached is, to the best of my knowledge, correct and complete.

(Note: It is a serious offense to make false or deceptive statements.)

1. Signature of Director <u>[Signature]</u>		Position with the Association <u>CHIEF FINANCIAL OFFICER</u>	
Home telephone number	Business telephone number <u>[REDACTED]</u>	Date <u>MAY 29, 2014</u>	
2. Signature of Director <u>[Signature]</u>		Position with the Association <u>MANAGER OF FINANCE</u>	
Home telephone number	Business telephone number <u>[REDACTED]</u>	Date <u>MAY 29, 2014</u>	



CANADIAN SOCCER ASSOCIATION
BOARD OF DIRECTORS
as of May 11, 2014

VICTOR MONTAGLIANI
President

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

STEVEN REED
Vice-President

[REDACTED]
[REDACTED]
[REDACTED]

WENDY BEDINGFIELD
Director

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

NICK BONTIS
Director

[REDACTED]
[REDACTED]
[REDACTED]

BRIAN BURDEN
Director

[REDACTED]
[REDACTED]
[REDACTED]

CHARMAINE CROOKS
Director

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

CHARLIE CUZZETTO
Director

[REDACTED]
[REDACTED]
[REDACTED]

RYAN FEQUET
Director

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

AMÉLIA FOUQUES
Director

[REDACTED]
[REDACTED]
[REDACTED]

GERALD MACDONALD
Director

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

MARTIAL PRUD'HOMME
Director

[REDACTED]
[REDACTED]
[REDACTED]

JOHN PUGH
Director

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

BOB RICHARDSON
Director

[REDACTED]
[REDACTED]
[REDACTED]

DON STORY
Director

[REDACTED]
[REDACTED]
[REDACTED]

The Canadian Soccer Association
Place Soccer Canada
237 Metcalfe Street
Ottawa, Ontario K1P 1R2

Ottawa, May 29 2014

Personnel authorized to issue official receipts for the Canadian Soccer Association

Mr. Sean Heffernan
Mrs. Francine Mérette
Mr. Peter Montopoli

Chief Operation Officer
Manager of Finance
General Secretary

PROCEDURES FOR REPLACEMENT OF LOST/SPOILED RECEIPTS

1. Lost Receipts:

We do not replace lost receipts, as we cannot prove that they were actually lost

2. Spoiled Receipts

The original receipt must be returned to us before another receipt is issued. All receipts are pre-numbered, so the spoiled receipt is "annulled" and a new one is prepared. The annulment is also made on other duplicate copies of the receipts (the ones retained in our office).