

07-17-42

## Registered Canadian Amateur Athletic Association Information Return

### Identification

Name of association <b>FIELD HOCKEY CANADA / HOCKEY SUR GAZON CANADA</b>	
Address <b>311 WEST 1ST STREET</b>	
City <b>NORTH VANCOUVER</b>	
Province or territory <b>British Columbia</b>	Postal code <b>V7M1B5</b>

Return for fiscal period ending							
2	0	1	4	0	3	3	1
Year				Month			Day
Is this the first return filed by this association?							
Yes <input checked="" type="checkbox"/>				No <input 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.							
File number <b>495242</b>							
BN/Registration number <b>121791487</b> <b>R R</b> <b>0001</b>							

Is the address above the same mailing address as last year?

Yes  No

If no, is the address above the new mailing address?

Yes  No

### Instructions

1. Complete the Identification area.
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 a completed return and all required documents to:

Charities Directorate  
Canada Revenue Agency  
Ottawa ON K1A 0L5

F5000003178393

Form authorized by the Minister of National Revenue.



**Information required**

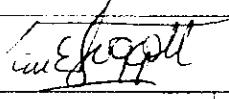
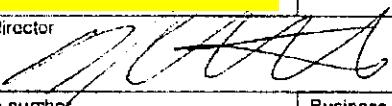
1. Have any changes not previously reported been made to the association's governing documents? If yes, please attach a certified copy of the changes. Yes  No
2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during 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. \$ 15,121.68
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
8. 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, IAN BAGGOTT of  Address
2. I, Gordon Plotte of  Address

HEREBY CERTIFY that the information given in this return and in all attachments is, to the best of my knowledge, correct, complete and current. (Note: It is a serious offense under the Income Tax Act to provide false or deceptive information.)

1. Signature of director 	Position with the association <b>PRESIDENT AND DIRECTOR</b>	
Home telephone number <span style="background-color: yellow; display: inline-block; width: 250px; height: 1.2em; vertical-align: middle;"></span>	Business telephone number <i>N/A</i>	Date <i>16-9-2014</i>
2. Signature of director 	Position with the association <b>DIRECTOR</b>	
Home telephone number <span style="background-color: yellow; display: inline-block; width: 250px; height: 1.2em; vertical-align: middle;"></span>	Business telephone number <span style="background-color: yellow; display: inline-block; width: 250px; height: 1.2em; vertical-align: middle;"></span>	Date <i>Sept. 5, 2014</i>

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## **Current Directors of Field Hockey Canada**

**1. Kim Ewasechko**



**2. Matthew Guest**



**3. John MacMillan**



**4. Ian Baggott**



**5. Barbara Ann Doggett**



**6. Thea Culley**



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**7. Gordon G. Plottel**



**8. Rhonda Lewis**



**9. Anne McMullin**

