



Canada Revenue
Agency

Agence du revenu
du Canada

OTTAWA ON K1A 0L5

**REGISTERED CANADIAN AMATEUR
ATHLETIC ASSOCIATION INFORMATION
RETURN**

000032

SHOOTING FEDERATION OF
CANADA - FEDERATION DE TIR DU
CANADA
45 SHIRLEY BLVD.
CONNAUGHT RANGES
NEPEAN ON K2K 2W6

Return for Fiscal Period Ending		
1201	14	1031311
Year	Month	Day
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.		



15 107978637 RR 0001 2014-03-31 0495416



F5000006534146

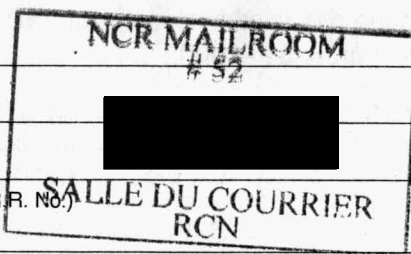
If the address shown above is incorrect or a more permanent address can be provided, print the necessary corrections below:

Name

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

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 a completed return and all required documents to:

Charities Directorate
Canada Revenue Agency
Ottawa ON K1A 0L5

Information Required


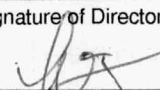
1. Have any changes not previously reported been made in the association's governing documents? If yes, please attach a certified copy of the changes. Yes ☐ No ☒
2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during 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. \$
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, Bernie Harrison of [REDACTED]
Name of director whose signature appears below. (Print) Address
2. I, Asmir Arifovic 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 		Position with the Association VP Administration	
Home telephone number [REDACTED]	Business telephone number [REDACTED]	Date Nov. 29/14	
2. Signature of Director 		Position with the Association President	
Home telephone number [REDACTED]	Business telephone number [REDACTED]	Date Nov 29/14	

2014/15 SFC EXECUTIVE, BOARD OF DIRECTORS and COMMITTEES
CONSEIL ADMINISTRATIF DE LA FTC 2014/15

EXECUTIVE COMMITTEE

Asmir Arifovic	President
Bernie Harrison	V/P Administration
Rick Ward	V/P High Performance
Sandra Honour	V/P Domestic and Operations
Pat Vamplew	V/P Section - Rifle
James Sandall	V/P Section - Pistol
Jason Caswell	V/P Section - Shotgun
Gilles Bédard	V/P Provincial/Territorial
Mo Johnson	V/P Provincial/Territorial
Greg Sych	Athletes Representative

BOARD OF DIRECTORS

SECTION CHAIRS

James Sandall	Pistol
Asmir Arifovic	Rifle
Lloyd Litwin / Jason Caswell (TBD)	Shotgun
Pat Vamplew	Fullbore Rifle (Cease to exist upon Certificate of Continuance)

BOARD MEMBERS AT LARGE

Rick Ward	2014
Cindy Hamulas	2014
Asmir Arifovic	2015
Bill Stanko	2015
Pat Boulay	2016
Sandra Honour	2016

PROVINCIAL & TERRITORIAL APPOINTEES

David Woolridge	Newfoundland & Labrador
Ray Fisher	Nova Scotia
Robert Kierstead	New Brunswick
Gilles Bédard	Québec
Ed Martin	Ontario
Melissa Deneka	Manitoba
Scott Arthur	Saskatchewan
Bernie Harrison	Alberta
Mo Johnson	British Columbia
Bud Rhyndress	Northwest Territories
Dave Whipp	Yukon

COMMITTEE CHAIRPERSONS/LIAISON TO EXECUTIVE COMMITTEE

Coaching – Susan Verdier

National Officials Development Committee – Dale Caswell (Trap & Chair), Vacant (ISSF & Rifle), Trent Doyle (Skeet), Harvey Lavigne (Pistol)

Commonwealth Games – Susan Verdier

Awards & Merits – Mo Johnson, Bob Kierstead, Marcel Dubois

Canadian Olympic Committee – Asmir Arifovic, Jason Caswell, Rick Ward, Susan Verdier

Canada Games Technical Representative – Susan Verdier

High Performance Committee – Rick Ward (Chair & Disabled), Vacant (Rifle), Bill Stanko (Shotgun), Patrick Haynes (Pistol), Richard Lanning (Junior), Greg Sych (Athlete Rep), Susan Verdier (Technical Director)

Web Site – Asmir Arifovic, Bernie Harrison, Adam Landriault, Susan Verdier

SFC BOARD OF DIRECTORS ADDRESS LISTING 2014-2015
LISTE D'ADRESSES DU CONSEIL ADMINISTRATIF DE LA FTC 2014-2015

IMPORTANT NOTE: This list is confidential and is not for distribution, publication or announcement. No phone numbers to be given out without prior authorization.

Arifovic, Asmir

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

Deneka, Deneka

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

Haynes, Patrick

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

Arthur, Scott

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

Doyle, Trent

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

Honour, Dr. Sandra

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

Bédard, Gilles (FQT)

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

Dubois, Marcel

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

Johnson, Mo

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

Boulay, Patricia

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

Fisher, Ray

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

Kierstead, Robert

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

Caswell, Dale

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

Harrison, Bernie

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

Lavigne, Harvey

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

Caswell, Jason

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

Hamulas, Cindy

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

Litwin, Lloyd

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

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[illegible][illegible]

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

Age Group	Male (%)	Female (%)
18-24	~45	~65
25-34	~75	~85
35-44	~55	~70
45-54	~50	~65
55-64	~45	~60
65+	~35	~55

Age Group	Percentage of Respondents
18-29	75%
30-39	75%
40-49	65%
50-59	75%
60-69	75%
70-79	75%
80+	85%

[illegible][illegible]
