

Canada Revenue Agency

Agence du revenu du Canada

OTTAWA ON K1A 0L5

Charities Directorate
Direction des Organismes des Bienfaisance

RECEIVED - REÇU

REGISTERED CANADIAN AMATEUR
ATHLETIC ASSOCIATION INFORMATION
RETURN

000043

Return for Fiscal Period Ending

12 01 18 1 0 13 3 1 1

Year Month Day

Is this the first return filed by this association?

Yes No

If "No", has the fiscal period changed from the last return filed?

Yes No

Is this the final return to be filed by this association?

Yes No

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.)

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).

the name and address are correct. To correct pre-printed information on this form, please use the

id. Any changes (except to the contact information above) must be explained in an attachment to

the boxes (above right) to indicate the end of the association's fiscal period.

NCIAL 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.

of the names, addresses, and occupations or lines of business of the association's current

of the names and the official positions of the people who are authorized to issue official documents on behalf of the association.

to show that fully explains what replacement procedure is followed in the event of lost or spoiled receipts.

Within 6 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

6000003862679

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. \$ 0

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. Morris Glimcher of _____
Name of director whose signature appears below. (Print)2. Costa Cholakis of _____
Name of director whose signature appears below. (Print)

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
[REDACTED]	[REDACTED] President
Home telephone number	Business telephone number
Date	
2. Signature of director	Position with the association
[REDACTED]	[REDACTED] Vice President
Home telephone number	Business telephone number
Date	

Bandy Federation of Canada

86627 1539 RR0002

List of Directors

Morris Glimcher

Officials authorized to issue official receipts

Morris Glimcher ~ President

Replacement procedure in the event of lost or spoiled receipts:

Lost or spoiled receipts are replaced with a duplicate receipt clearly marked "duplicate, replacing receipt number..."

Copy

Bandy Federation of Canada
Financial Statement Ending March 31, 2018

	Year Ending March 31	
	2017	2018
Receipts		
Investment Income	\$ 12.52	\$ 10.96
Membership	\$ 1,200.00	
Sponsorship and Fundraising	<u>\$ 7,550.00</u>	
	<u>\$ 8,762.52</u>	<u>\$ 10.96</u>
Disbursements		
National Teams	\$ 7,127.21	
Bank Charges		
Clinics		
Equipment		
World Championships/FIB	<u>\$ 4,334.00</u>	
	<u>\$ 11,461.21</u>	<u>\$ -</u>
Balance	<u><i>\$ (2,698.69)</i></u>	<u><i>\$ 10.96</i></u>