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February 15, 2019

Dear Municipal Clerk/ Designated Official,

Please accept our attached filing of the Form 8 on behalf of Campaign Life Coalition. Under the criterion of the Municipal Elections Act, Campaign Life Coalition did not act as a 3rd party advertiser and therefore has not collected any contributions or incurred any expenses.

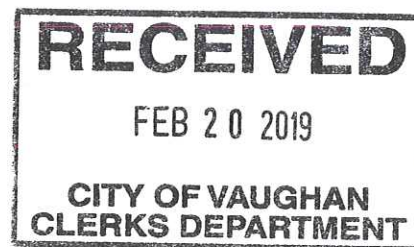
As the form did not have a check box to indicate that Campaign Life Coalition did not collect any contributions for third party advertising or incur any expenses related to third party advertising, we have been instructed to submit the entire form, filling out the first page with an original signature, but leaving the rest of the form blank, it is attached.

If you have any questions or require anything further from us, please contact my assistant Shantel Jose at 416-204-9749 for immediate assistance.

We thank you for your facilitation of this process.

Regards,

Jeff Gunnarson
President
Campaign Life Coalition



Instructions:

All registrants must complete Boxes A, B, C and D and Schedule 1. All registrants must complete Schedule 2 as appropriate. Registrants who receive contributions or incur expenses in excess of \$10,000 must also attach an Auditor's Report.

All surplus funds (after any refund to the registrant or, if the registrant is an individual, their spouse) shall be paid immediately over to the clerk who was responsible for the conduct of the election.

For the campaign period from

YYYY	MM	DD
2 0 1 8	1 0	1 9

 to

YYYY	MM	DD
2 0 1 8	1 2	3 1

Initial filing reflecting finances to December 31 (or 45 days after voting day in a by-election)

Supplementary filing including finances after December 31 (or 45 days after voting day in a by-election)

Box A: Name of Registrant

Name of Registrant (individual, trade union or corporation)
Campaign Life Coalition

Official Representative (name of person signing on behalf of trade union or corporation)

Last Name or Single Name Gunnarson	Given Name(s) Jeff
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Municipality
Vaughan

Spending Limit – General
\$ 14,536.20

Spending Limit – Parties and Other Expressions of Appreciation
\$ 1,453.62

Box B: Declaration

I, Jeff Gunnarson, a registrant (or official representative)

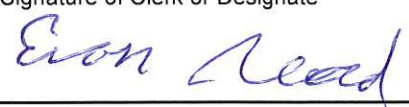
declare that to the best of my knowledge and belief that these financial statements and attached supporting schedules are true and correct.



Signature of Registrant (or Official Representative)

2019/02/08

Date (yyyy/mm/dd)

Date Filed (yyyy/mm/dd) 2019/02/00	Time Filed 4:00 p.m.	Initial of Registrant, Official Representative or Agent (if filed in person)	Signature of Clerk or Designate 
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Expenses not subject to spending limit

Accounting and audit	+ \$	_____
Cost of fundraising events/activities (list details in Part IV of Schedule 2)	+ \$	_____
Office expenses incurred after voting day	+ \$	_____
Phone and/or internet expenses incurred after voting day	+ \$	_____
Salaries, benefits, honoraria, professional fees incurred after voting day	+ \$	_____
Bank charges incurred after voting day	+ \$	_____
Interest charged on loan after voting day	+ \$	_____
Expenses related to recount	+ \$	_____
Expenses related to controverted election	+ \$	_____
Expenses related to compliance audit	+ \$	_____
Expenses related to a registrant's disability (provide full details)		
1. _____	+ \$	_____
2. _____	+ \$	_____
3. _____	+ \$	_____
4. _____	+ \$	_____
5. _____	+ \$	_____
Other (provide full details)		
1. _____	+ \$	_____
2. _____	+ \$	_____
3. _____	+ \$	_____
4. _____	+ \$	_____
5. _____	+ \$	_____
Total Expenses not subject to spending limits	= \$	_____ C4

Total Campaign Expenses (C2 + C3 + C4) = \$ _____ C5

Box D: Calculation of Surplus or Deficit

Excess (deficiency) of income over expenses (Income minus Total Expenses) (C1 – C5)	+ \$	_____ D1
If there is a surplus, deduct any refund of registrant's or spouse's contributions to the campaign	- \$	_____
Surplus (or deficit) for the campaign	= \$	_____ D2

If line D2 shows a surplus, the amount must be paid in trust, at the time the financial statements are filed, to the municipal clerk who was responsible for the conduct of the election.

Table 2: Monetary contributions from corporations or trade unions

Name (legal and carrying on business as)	Full Address	President or Business Manager	Authorized Representative	Date Received	Amount \$ Received	Amount \$ Returned to Contributor or Paid to Clerk
<input type="checkbox"/> Additional information is listed on separate supplementary attachment					Total	

Table 3: Contributions in goods or services from individuals other than registrant or spouse
 (Note: must also be recorded as expenses in Box C)

Name	Full Address	Description of Goods or Services	Date Received	Value \$	Amount \$ Returned to Contributor or Paid to Clerk
<input type="checkbox"/> Additional information is listed on separate supplementary attachment				Total	

Schedule 2 – Fundraising Events and Activities

Fundraising Event/Activity

Complete a separate schedule for each event or activity held

Additional schedule(s) attached

Description of fundraising event/activity _____

Date of event/activity (yyyy/mm/dd) _____

Part I – Ticket Revenue

Admission charge (per person)

(If there are a range of ticket prices, attach complete breakdown of all ticket sales)

Number of tickets sold

\$ _____ 2A
X _____ 2B

Total Part I (2A X 2B) (include in Part 1 of Schedule 1)

= \$ _____

Part II – Other revenue deemed a contribution

(e.g. revenue from goods sold in excess of fair market value)

Provide details

1. _____ + \$ _____
2. _____ + \$ _____
3. _____ + \$ _____
4. _____ + \$ _____
5. _____ + \$ _____

Total Part II (include in Part 1 of Schedule 1)

= \$ _____

Part III – Other revenue not deemed a contribution

(e.g. contributions of \$25 or less; market value of goods or services sold)

Provide details

1. _____ + \$ _____
2. _____ + \$ _____
3. _____ + \$ _____
4. _____ + \$ _____
5. _____ + \$ _____

Total Part III (include under Income in Box C)

= \$ _____

Part IV – Expenses related to fundraising event or activity

Provide details

1. _____ + \$ _____
2. _____ + \$ _____
3. _____ + \$ _____
4. _____ + \$ _____
5. _____ + \$ _____
6. _____ + \$ _____
7. _____ + \$ _____
8. _____ + \$ _____

Total Part IV (include under Expenses in Box C)

= \$ _____