



# The Electoral Commission

## Campaign expenditure return by a party on the Northern Ireland register - *Combined Limit*

Important: the accompanying explanatory notes should be read before completing this form.

### A1 Details of registered party

Party name

Regulated period  Election

Party reference

### A2 Declaration and signature

I declare that I have examined the information in this return and that, to the best of my knowledge and belief, it is a complete and correct return as required by law, and that all expenses shown in it as paid, have been paid by me or one of my deputies or by a person authorised under section 76 of the Political Parties, Elections and Referendums Act 2000.

Signed  Date     
dd mm yyyy

Printed name

Registered treasurer / campaigns officer (delete as applicable)

### A3 Audited return

Accounts audited: Yes  No  (Tick as appropriate)

If applicable:

Name of auditor

Address

Town  County  Postcode

Party name **Sinn Féin**

Regulated period **5/02/09 - 6/05/10**

Election(s) **Westminster 2010**  
~~Westminster 2009~~

**Section B: Summary of expenditure**

**B1 Types of payment**

Summary information required (to the nearest £)	Total £
Total payments made	64078.42
Total of notional expenditure	0.00
Total of unpaid claims	0.00
Total of disputed claims	0.00
Total of above expenditure	64078.42

**B2 Constituencies/regions contested**

Number of constituencies/regions contested **17**

**B3 Categories of expenditure**

Summary information required (to the nearest £)	Total £
A. Party political broadcasts	22972.87
B. Advertising	27149.26
C. Unsolicited material to electors	10910.28
D. Manifesto/party policy documents	1026.21
E. Market research/canvassing	0.00
F. Media	0.00
G. Transport	630.00
H. Rallies and other events	1389.20
I. Overheads and general administration	0.00
Total expenditure	<del>64078</del> 64078.42

Expenditure should be rounded to the nearest £

### B4 Summary of expenditure reported in a previous return

(to the nearest £)	Total £
Total of payments made	38824.39
Total of notional expenditure incurred	0.00
Total of unpaid claims	0.00
Total of disputed claims	0.00
<b>Total</b>	<b>38824.39</b>

### B5 Confirmation of submission of invoices/receipts in a previous return

All invoices/receipts required in support of relevant expenditure included in B4 above have been submitted with a previous return in respect of:

European Election

which was held on (please indicate previous election(s):

4/06/2009

Yes/No please delete as applicable

Yes

No

### B6 Categories of expenditure

Summary Information required (to the nearest £)	Total £
A. Party political broadcasts	25999.22
B. Advertising and publicity material	0.00
C. Unsolicited material to electors	11543.77
D. Manifesto / party policy documents	1281.40
E. Market research / canvassing	0.00
F. Media	0.00
G. Transport	0.00
H. Rallies and other events	0.00
I. Overheads and general administration	0.00
<b>Total expenditure</b>	<b>38824.39</b>

Note: Expenditure totals should be rounded to the nearest £

Party name **Sinn Fein**

Regulated period

Election(s) **Westminster 2010**

**Section C: payments made**

Number of entries made in this section

**C1 Actual payments – statement of individual payments**

No. **1** Date expense incurred  **02**  **10**  
dd mm yyyy

Category of expense (A-I) **A** Date of claim for payment **23** **03** **10**  
dd mm yyyy

Date claim paid **21** **04** **10** Amount £.pp **4825.68**  
dd mm yyyy

Supplier (name and address)

Name **Piranha Bar**

Address **37 Fitzwilliam Square**

Town **DUBLIN** County  Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. **2** Date expense incurred  **02**  **10**  
dd mm yyyy

Category of expense (A-I) **A** Date of claim for payment **02** **03** **10**  
dd mm yyyy

Date claim paid **21** **04** **10** Amount £.pp **2685.28**  
dd mm yyyy

Supplier (name and address)

Name **Ger Philpott**

Address **5 Church Street East**

Town **DUBLIN** County  Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name Sun Fein

Regulated period

Election(s) Westminster 2010

No. 3

Date expense incurred 11 02 10 to 19 02 10  
dd mm yyyy dd mm yyyy

Category of expense (A-I) A

Date of claim for payment 18 02 10  
dd mm yyyy

Date claim paid 04 03 10  
dd mm yyyy

Amount £.pp 4544.22

Supplier (name and address)  
Name Declan Emerson

Address 51 Charlestown Road Ranelagh

Town Dublin 6 County  Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. A 4.

Date expense incurred 06 01 10  
dd mm yyyy

Category of expense (A-I) A

Date of claim for payment 18 02 10  
dd mm yyyy

Date claim paid 01 03 10  
dd mm yyyy

Amount £.pp 923.28

Supplier (name and address)  
Name Cormac Downes

Address 118 Bow Bridge Place Kilmainham

Town Dublin 8 County  Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name Sinn Féin

Regulated period

Election(s) Westminster 2010

No. 5

Date expense incurred 21 04 10  
dd mm yyyy

Category of expense (A-I) A

Date of claim for payment 21 04 10  
dd mm yyyy

Date claim paid 19 05 10  
dd mm yyyy

Amount £.pp 4860.82

Supplier (name and address)

Name Piranha Bar

Address 37 Fitzwilliam Square

Town DUBLIN 2

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. 6

Date expense incurred 26 03 10  
dd mm yyyy

Category of expense (A-I) A

Date of claim for payment 26 03 10  
dd mm yyyy

Date claim paid 21 04 10  
dd mm yyyy

Amount £.pp 1927.06

Supplier (name and address)

Name Declan Emerson

Address 51 Charleston Road, Ranelagh

Town DUBLIN 6

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name **Sun Fein**

Regulated period

Election(s) **Westminster 2010**

No. **7**

Date expense incurred **26 03 10**  
dd mm yyyy

Category of expense (A-I) **A**

Date of claim for payment **02 05 10**  
dd mm yyyy

Date claim paid **21 05 10**  
dd mm yyyy

Amount £.pp **1787.63**

Supplier (name and address)

Name **Ger Philpott**

Address **5 Church Street East**

Town **DUBLIN 3** County Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. **8**

Date expense incurred **07 04 10**  
dd mm yyyy

Category of expense (A-I) **A**

Date of claim for payment **07 04 10**  
dd mm yyyy

Date claim paid **19 05 10**  
dd mm yyyy

Amount £.pp **681.08**

Supplier (name and address)

Name **The Base**

Address **45 Fitzwilliam Square**

Town **DUBLIN 2** County Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name **Sinn Fein**

Regulated period

Election(s) **Westminster 2010**

No. **9**

Date expense incurred **10 03 10**  
dd mm yyyy

Category of expense (A-I) **A**

Date of claim for payment **10 03 10**  
dd mm yyyy

Date claim paid **01 06 10**  
dd mm yyyy

Amount £.pp **120.00**

Supplier (name and address)

Name **Aidan Molloy**

Address **20 Loughbracken Road Pomeroy**

Town **Dungannon**

County **Tyrone**

Postcode

Invoice/receipt submitted: Yes  No  (Tick as appropriate)

No. **32**

Date expense incurred **05 01 10**  
dd mm yyyy

Category of expense (A-I) **A**

Date of claim for payment **05 01 10**  
dd mm yyyy

Date claim paid **15 03 10**  
dd mm yyyy

Amount £.pp **567.82**

Supplier (name and address)

Name **Ti Chulainn Ltd**

Address **An Mullach Bán, An tIúir**

Town

County **Ard Mhacha**

Postcode **BT35 9TT**

Invoice/receipt submitted: Yes  No  (Tick as appropriate)

Party name **Sinn Fein**

Regulated period

Election(s) **Westminster 2010**

No. **10**

Date expense incurred **30 04 10**  
dd mm yyyy

Category of expense (A-I) **B**

Date of claim for payment **30 04 10**  
dd mm yyyy

Date claim paid **13 04 10**  
dd mm yyyy

Amount £.pp **1333.63**

Supplier (name and address)

Name **JC Decaux**

Address **15 Kilwee Business Park**

Town **Belfast** County **Antrim** Postcode **BT17 0HD**

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. **11**

Date expense incurred **11 04 10**  
dd mm yyyy

Category of expense (A-I) **B**

Date of claim for payment **16 04 10**  
dd mm yyyy

Date claim paid **13 04 10**  
dd mm yyyy

Amount £.pp **693.25**

Supplier (name and address)

Name **JC Decaux**

Address **15 Kilwee Business Park**

Town **Belfast** County **Antrim** Postcode **BT17 0HD**

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name Sinn Fein

Regulated period

Election(s) Westminster 2010

No. 12

Date expense incurred 16 04 10  
dd mm yyyy

Category of expense (A-I) B.

Date of claim for payment 16 04 10  
dd mm yyyy

Date claim paid 31 05 10  
dd mm yyyy

Amount £.pp 1292.50

Supplier (name and address)

Name Alexander Boyd Displays

Address Lambeg Mills, Lambeg

Town LISBURN

County Antrim

Postcode BT27 5SX

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. 13

Date expense incurred 27 04 10  
dd mm yyyy

Category of expense (A-I) B.

Date of claim for payment 27 04 10  
dd mm yyyy

Date claim paid 31 05 10  
dd mm yyyy

Amount £.pp 1603.88

Supplier (name and address)

Name Alexander Boyd Displays

Address Lambeg Mills, Lambeg

Town LISBURN

County Antrim

Postcode BT27 5SX

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name SUN FEIN

Regulated period

Election(s) Westminster 2010

No. 14

Date expense incurred 36 04 10  
dd mm yyyy

Category of expense (A-I) B.

Date of claim for payment 30 04 10  
dd mm yyyy

Date claim paid 31 05 10  
dd mm yyyy

Amount £.pp 8272.00

Supplier (name and address)

Name Alexander Boyd Displays

Address Lambeg Mills, Lambeg

Town LISBURN

County Antrim

Postcode BT 27 5BX

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. 15.

Date expense incurred 5 05 10  
dd mm yyyy

Category of expense (A-I) B.

Date of claim for payment 10 05 10  
dd mm yyyy

Date claim paid 31 05 10  
dd mm yyyy

Amount £.pp 287.88

Supplier (name and address)

Name Alexander Boyd Displays

Address Lambeg Mills Lambeg

Town LISBURN

County Antrim

Postcode BT 27 5BX

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name

Regulated period

Election(s)

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of claim for payment     
dd mm yyyy

Date claim paid     
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of claim for payment     
dd mm yyyy

Date claim paid     
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name Sinn Fein

Regulated period

Election(s) Westminster 2010

No. 23

Date expense incurred 12 04 10  
dd mm yyyy

Category of expense (A-I) B.

Date of claim for payment 26 04 10  
dd mm yyyy

Date claim paid 01 06 10  
dd mm yyyy

Amount £.pp 452.37

Supplier (name and address)

Name Shankoe Photography

Address 1a Forkhill Road Mullaghbawn

Town Newry

County Down

Postcode BT 35 9XJ

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. 30.

Date expense incurred 29 04 10  
dd mm yyyy

Category of expense (A-I) B.

Date of claim for payment 29 04 10.  
dd mm yyyy

Date claim paid 21 05 10  
dd mm yyyy

Amount £.pp 763.75

Supplier (name and address)

Name RNIB

Address PO Box 173

Town Peterborough

County

Postcode PE2 6WS.

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name

Regulated period

Election(s)

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of claim for payment     
dd mm yyyy

Date claim paid     
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of claim for payment     
dd mm yyyy

Date claim paid     
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name **SIM FEIN**

Regulated period

Election(s) **Westminster 2010**

No. **18**

Date expense incurred **28 04 10**  
dd mm yyyy

Category of expense (A-I) **C**

Date of claim for payment **30 04 10**  
dd mm yyyy

Date claim paid **01 06 10**  
dd mm yyyy

Amount £.pp **804.88.**

Supplier (name and address)

Name **DOWN RECORDER**

Address **2-4 CHURCH ST,**

Town **Downpatrick** County **Down** Postcode **BT30 6EJ.**

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. **19**

Date expense incurred **28 04 10**  
dd mm yyyy

Category of expense (A-I) **C**

Date of claim for payment **28 04 10**  
dd mm yyyy

Date claim paid **01 06 10**  
dd mm yyyy

Amount £.pp **1057.50**

Supplier (name and address)

Name **MOURNE OBSERVER LTD**

Address **Castlewellan Road**

Town **Newcastle** County **Down** Postcode **BT33 0JX**

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name SIM FEIN

Regulated period

Election(s) WESTMUSTER 2010

No. 20

Date expense incurred 30 04 10  
dd mm yyyy

Category of expense (A-I) C

Date of claim for payment 30 04 10  
dd mm yyyy

Date claim paid 01 06 10  
dd mm yyyy

Amount £.pp 387.75

Supplier (name and address)

Name Belfast Media Group

Address Teach Basil 2 Hannaghstown Hill

Town Belfast

County ANTRIM

Postcode BT17 0LT

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. 21

Date expense incurred 30 04 10  
dd mm yyyy

Category of expense (A-I) C

Date of claim for payment 30 05 10  
dd mm yyyy

Date claim paid 01 06 10  
dd mm yyyy

Amount £.pp 5500.00

Supplier (name and address)

Name NOVAPRINT

Address 5-7 Conway St.

Town Belfast

County ANTRIM

Postcode BT13 2DE

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name GIM FEN

Regulated period 5/02/09 - 6/05/10

Election(s) Westminster 2010

No. 33

Date expense incurred 28 04 2010  
dd mm yyyy

Category of expense (A-I) C

Date of claim for payment 28 04 2010  
dd mm yyyy

Date claim paid 01 06 2010  
dd mm yyyy

Amount £.pp 1222.00

Supplier (name and address)

Name NWIPP

Address John Street

Town omagh County Tyrone Postcode BT78 1DW

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of claim for payment     
dd mm yyyy

Date claim paid     
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town  County  Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name Sinn Fein

Regulated period

Election(s) Westminster 2010

No. 24

Date expense incurred 15 04 10  
dd mm yyyy

Category of expense (A-I) D

Date of claim for payment 15 04 10  
dd mm yyyy

Date claim paid 15 04 10  
dd mm yyyy

Amount £.pp 677.75

Supplier (name and address)

Name Excite

Address 4 Ferguson Drive Knockmore Ind. Estate

Town LISBURN

County Antrim

Postcode BT28 2EX

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. 25

Date expense incurred 28 04 10  
dd mm yyyy

Category of expense (A-I) D

Date of claim for payment 30 04 10  
dd mm yyyy

Date claim paid 19 05 10  
dd mm yyyy

Amount £.pp 348.46

Supplier (name and address)

Name Speciality Print

Address Donore Avenue

Town DUBLIN

County

Postcode

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name SIM FEIN

Regulated period

Election(s) Westminster 2010

No. 26

Date expense incurred 28 04 10  
dd mm yyyy

Category of expense (A-I) H

Date of claim for payment 07 05 10  
dd mm yyyy

Date claim paid 01 06 10  
dd mm yyyy

Amount £.pp 630.51

Supplier (name and address)

Name Grand Opera House

Address Great Victoria St.

Town Belfast

County Antrim

Postcode BT2 7HA

Invoice/receipt submitted: Yes  No  (Tick as appropriate)

No. 27

Date expense incurred 01 05 10  
dd mm yyyy

Category of expense (A-I) G.

Date of claim for payment 27 05 10  
dd mm yyyy

Date claim paid 28 05 10  
dd mm yyyy

Amount £.pp 630.00

Supplier (name and address)

Name Haddington Coach + Limo Hire

Address 17c Station View

Town Dunmurry

County DUNMURRY

Postcode BT17 0AE

Invoice/receipt submitted: Yes  No  (Tick as appropriate)

Party name **Sinn Fein**

Regulated period

Election(s) **Westminster 2010**

No. **28**

Date expense incurred **15 04 10**  
dd mm yyyy

Category of expense (A-I) **H**

Date of claim for payment **15 04 10**  
dd mm yyyy

Date claim paid **01 06 10**  
dd mm yyyy

Amount £.pp **161.20**

Supplier (name and address)

Name **Mount Charles Catering**

Address **Belfast Waterfront Hall 2 Lanyon Place**

Town **Belfast** County Postcode **BT2 3LP**

Invoice/receipt submitted Yes  No  (Tick as appropriate)

No. **29**

Date expense incurred **15 04 10**  
dd mm yyyy

Category of expense (A-I) **H**

Date of claim for payment **27 04 10**  
dd mm yyyy

Date claim paid **01 06 10**  
dd mm yyyy

Amount £.pp **597.49**

Supplier (name and address)

Name **Belfast City Council**

Address **Adelaide Exchange 24-26 Adelaide St**

Town **Belfast** County **Antrim** Postcode **BT2 8SD**

Invoice/receipt submitted Yes  No  (Tick as appropriate)

Party name

Regulated period

Election(s)

**C2 Notional expenditure – statement of individual items**

Number of entries made in this section

No.  Period/date expense incurred    to     
dd mm yyyy dd mm yyyy

Category of expense (A-I)  Amount £.pp

Nature of expenditure

Supplier (name and address)

Name

Address

Town  County  Postcode

Declaration submitted if over £200\* Yes  No  (Tick as appropriate)

No.  Period/date expense incurred    to     
dd mm yyyy dd mm yyyy

Category of expense (A-I)  Amount £.pp

Nature of expenditure

Supplier (name and address)

Name

Address

Town  County  Postcode

Declaration submitted if over £200\* Yes  No  (Tick as appropriate)

\* A declaration signed by the Treasurer/campaigns officer (or a deputy) must be provided in respect of the amount of each item with a value exceeding £200

Party name

Regulated period  Election(s)

No.  Period/date expense incurred     to     
dd mm yyyy dd mm yyyy

Category of expense (A-I)  Amount £.pp

Nature of expenditure

Supplier (name and address)

Name

Address

Town  County  Postcode

Declaration submitted if over £200\* Yes  No  (Tick as appropriate)

No.  Period/date expense incurred    to     
dd mm yyyy dd mm yyyy

Category of expense (A-I)  Amount £.pp

Nature of expenditure

Supplier (name and address)

Name

Address

Town  County  Postcode

Declaration submitted if over £200\* Yes  No  (Tick as appropriate)

\* A declaration signed by the Treasurer/campaigns officer (or a deputy) must be provided in respect of the amount of each item with a value exceeding £200

Party name

Relevant period

Election(s)

**Section D: Statement of unpaid claims**  
(where an application has been, or is about to be, made to a court under Section 77(4) of PPERA 2000)

Number of entries made in this section

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of invoice     
dd mm yyyy

Amount of unpaid claim £.pp

Supplier (name and address)

Name

Address

Town  County  Postcode

Comments

No.

Date expense incurred     
dd mm yyyy

Category of expense (A-I)

Date of invoice     
dd mm yyyy

Amount of unpaid claim £.pp

Supplier (name and address)

Name

Address

Town  County  Postcode

Comments

Party name

Sinn Fein

Relevant period

Election(s)

Westminster 2010

Section E: Statement of disputed claims

Number of entries made in this section

No.

Date of disputed claim

  
dd mm yyyy

Category of expense (A-I)

Date of invoice

  
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town

County

Postcode

Comments

No.

Date of disputed claim

  
dd mm yyyy

Category of expense (A-I)

Date of invoice

  
dd mm yyyy

Amount £.pp

Supplier (name and address)

Name

Address

Town

County

Postcode

Comments



For The Electoral Commission use

Date of receipt

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Checked by:

Date entered in database

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Checked by:

Date entered on website

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Checked by:

File reference

Please return the form to:

Regulatory Services  
The Electoral Commission  
Trevelyan House  
30 Great Peter Street  
London SW1P 2HW

Tel: 020 7271 0513/0515

Fax: 020 7271 0505

Email: [rs@electoralcommission.org.uk](mailto:rs@electoralcommission.org.uk)

Website: [www.electoralcommission.org.uk](http://www.electoralcommission.org.uk)