

Campaign expenditure return by a party on the Northern Ireland register

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 **DEMOCRATIC UNIONIST PARTY**

Regulated period **6-1-11 - 5-5-11** Election(s) **ASSEMBLY 2011**

Section B: Summary of expenditure

B1 Types of payment

| Summary information required (to the nearest £) | Total £ |
|---|----------|
| Total payments made | 84013.52 |
| Total of notional expenditure | 500.00 |
| Total of unpaid claims | — |
| Total of disputed claims | — |
| Total of above expenditure | 84513.52 |

B2 Constituencies/regions contested

Number of constituencies/regions contested **18**

B3 Categories of expenditure

| Summary information required (to the nearest £) | Total £ |
|---|-----------|
| A. Party political broadcasts | 31,560.00 |
| B. Advertising | 17,918.92 |
| C. Unsolicited material to electors | 22,466.00 |
| D. Manifesto/party policy documents | 2,020.00 |
| E. Market research/canvassing | — |
| F. Media | 4,800.00 |
| G. Transport | — |
| H. Rallies and other events | 5,248.60 |
| I. Overheads and general administration | 500.00 |
| Total expenditure | 84513.52 |

Expenditure should be rounded to the nearest £

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6-1-11 - 5-5-11** Election(s) **ASSEMBLY 2011**

Section C: payments made

Number of entries made in this section **40**

C1 Actual payments – statement of individual payments

No. **27** Date expense incurred **23** **4** **2011**
dd mm yyyy

Category of expense (A-I) **B** Date of claim for payment **24** **4** **2011**
dd mm yyyy

Date claim paid **8** **5** **2011** Amount £.pp **1717.20**
dd mm yyyy

Supplier (name and address)
Name **JOHNSTON FURNISHING (NI)**

Address **2 ESKY DRIVE,**

Town **PORTADOWN** County Postcode **BT635YY**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **28** Date expense incurred **25** **4** **2011**
dd mm yyyy

Category of expense (A-I) **B** Date of claim for payment **8** **5** **2011**
dd mm yyyy

Date claim paid **26** **5** **2011** Amount £.pp **3072.00**
dd mm yyyy

Supplier (name and address)
Name **CLEAR CHANNEL NI LTD.**

Address **UNIT 2 ASHBANK, CHANNEL COMMERCIAL PARK, QUEENS RD**

Town **BELFAST** County Postcode **BT39DT.**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name DEMOCRATIC UNIONIST PARTY

Regulated period 6-11-5-5-11 Election(s) ASSEMBLY 2011

No. 1 Date expense incurred 28 3 2011 to 3 5 2011
dd mm yyyy dd mm yyyy

Category of expense (A-I) A Date of claim for payment 28 3 2011
dd mm yyyy

Date claim paid 30 3 2011 Amount £.pp 7,950.00
dd mm yyyy

Supplier (name and address)

Name FRAME

Address 100 BRUNSWICK STREET

Town GLASGOW County Postcode G1 1TF

Invoice/receipt submitted Yes No (Tick as appropriate)

No. 2 Date expense incurred 31 3 2011
dd mm yyyy

Category of expense (A-I) A Date of claim for payment 31 3 2011
dd mm yyyy

Date claim paid 8 5 2011 Amount £.pp 7950.00
dd mm yyyy

Supplier (name and address)

Name FRAME

Address 100 BRUNSWICK STREET

Town GLASGOW County Postcode G1 1TF

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **3** Date expense incurred **15** **4** **2011** to **3** **5** **2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **A** Date of claim for payment **15** **4** **2011**
dd mm yyyy

Date claim paid **16** **5** **2011** Amount £.pp **720.00**
dd mm yyyy

Supplier (name and address)

Name **FRAME**

Address **100 BRUNSWICK STREET**

Town **GLASGOW** County Postcode **G1 1TF**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **4** Date expense incurred **19** **4** **2011**
dd mm yyyy

Category of expense (A-I) **A** Date of claim for payment **15** **4** **2011**
dd mm yyyy

Date claim paid **12** **5** **2011** Amount £.pp **6,600.00**
dd mm yyyy

Supplier (name and address)

Name **MGTV**

Address **555 LISBURN ROAD**

Town **BELFAST** County Postcode **BT9 7GQ**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **5** Date expense incurred to **3** **5** **2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **A** Date of claim for payment **3** **5** **2011**
dd mm yyyy

Date claim paid **8** **5** **2011** Amount £.pp **7440.00**
dd mm yyyy

Supplier (name and address)

Name **MGTV**

Address **555 LISBURN ROAD**

Town **BELFAST** County Postcode **BT9 7GQ**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **6** Date expense incurred **3** **5** **2011**
dd mm yyyy

Category of expense (A-I) **A** Date of claim for payment **1** **6** **2011**
dd mm yyyy

Date claim paid **4** **6** **2011** Amount £.pp **900.00**
dd mm yyyy

Supplier (name and address)

Name **NETWORK MEDIA.**

Address **23 CULTRA AVENUE**

Town **HOLYWOOD** County Postcode **BT18 0AZ**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name DEMOCRATIC UNIONIST PARTY

Regulated period 6.1.11 - 5.5.11 Election(s) ASSEMBLY 2011

No. 7 Date expense incurred 1 3 2011 to 24 5 2011
dd mm yyyy dd mm yyyy

Category of expense (A-I) F Date of claim for payment 24 5 2011
dd mm yyyy

Date claim paid 26 5 2011 Amount £.pp 4,200.00
dd mm yyyy

Supplier (name and address)

Name DIRECT IT MARKETING LTD

Address 252A HILLHALL ROAD

Town LISBURN County Postcode BT27 5JQ

Invoice/receipt submitted Yes No (Tick as appropriate)

No. 8 Date expense incurred 28 3 2011
dd mm yyyy

Category of expense (A-I) H Date of claim for payment 29 3 2011
dd mm yyyy

Date claim paid 1 6 2011 Amount £.pp 600.00
dd mm yyyy

Supplier (name and address)

Name FOCUS AUDIO VISUAL

Address 8 CASTLETON

Town TEMPLEPATRICK County Postcode BT39 0AZ

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **11** Date expense incurred **11 4 2011** to **12 4 2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **H** Date of claim for payment **19 4 2011**
dd mm yyyy

Date claim paid **8 5 2011** Amount £.pp **330.00**
dd mm yyyy

Supplier (name and address)

Name **LISBURN CITY COUNCIL**

Address **ISLAND CIVIC CENTRE, THE ISLAND,**

Town **LISBURN** County Postcode **BT27 4RL**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **12** Date expense incurred **29 3 2011**
dd mm yyyy

Category of expense (A-I) **H** Date of claim for payment **29 3 2011**
dd mm yyyy

Date claim paid **8 5 2011** Amount £.pp **557.90**
dd mm yyyy

Supplier (name and address)

Name **ORMEAU BATHS GALLERY**

Address **18a ORMEAU AVENUE**

Town **BELFAST** County Postcode **BT2 8HS**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6-1-11 - 5-5-11** Election(s) **ASSEMBLY 2011**

No. **13** Date expense incurred to **29 3 2011**
dd mm yyyy

Category of expense (A-I) **H** Date of claim for payment **2 4 2011**
dd mm yyyy

Date claim paid **8 5 11** Amount £.pp **189.00**
dd mm yyyy

Supplier (name and address)

Name **PETER DOWAS**

Address **[REDACTED]**

Town **[REDACTED]** County Postcode **[REDACTED]**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **14** Date expense incurred **30 3 2011**
dd mm yyyy

Category of expense (A-I) **H** Date of claim for payment **31 3 2011**
dd mm yyyy

Date claim paid **16 5 2011** Amount £.pp **450.00**
dd mm yyyy

Supplier (name and address)

Name **STORMONT HOTEL**

Address **UPPER NIARDS ROAD.**

Town **BELFAST** County Postcode **BT4 3LP**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **19** Date expense incurred to **18 4 2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **H.** Date of claim for payment **18 4 2011**
dd mm yyyy dd mm yyyy

Date claim paid **16 5 2011** Amount £.pp **180.00**
dd mm yyyy dd mm yyyy

Supplier (name and address)

Name **MOUNT CHARLES CATERING LTD**

Address **2 LANYON PLACE**

Town **BELFAST** County Postcode **BT1 3WH**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **20** Date expense incurred **12 4 2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **H** Date of claim for payment **13 4 2011**
dd mm yyyy dd mm yyyy

Date claim paid **16 5 2011** Amount £.pp **142.50**
dd mm yyyy dd mm yyyy

Supplier (name and address)

Name **MOUNT CHARLES CATERING LTD**

Address **2 LANYON PLACE**

Town **BELFAST** County Postcode **BT1 3WH**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **23** Date expense incurred **24 4 2011** to **5 5 2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **B** Date of claim for payment **29 4 2011**
dd mm yyyy

Date claim paid **4 4 2011** Amount £.pp **2196.00**
dd mm yyyy

Supplier (name and address)

Name **JCDECAUX**

Address **16 KILWEE BUSINESS PARK, UPPER DUNMURRY LANE**

Town **BELFAST** County Postcode **BT17 0HA**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **24** Date expense incurred **10 4 2011**
dd mm yyyy

Category of expense (A-I) **B** Date of claim for payment **15 4 2011**
dd mm yyyy

Date claim paid **4 4 2011** Amount £.pp **300.00**
dd mm yyyy

Supplier (name and address)

Name **JCDECAUX**

Address **16 KILWEE BUSINESS PARK, UPPER DUNMURRY LANE**

Town **BELFAST** County Postcode **BT17 0HA**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY.**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **29** Date expense incurred **3 5 2011** to **5 5 2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **B** Date of claim for payment **5 5 2011**
dd mm yyyy

Date claim paid **25 5 2011** Amount £.pp **3060.00**
dd mm yyyy

Supplier (name and address)

Name **IND. NEWS & MEDIA (NI).**

Address **124-144 ROYAL AVENUE**

Town **BELFAST.** County Postcode **BT1 1EB**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **30** Date expense incurred **30 4 2011**
dd mm yyyy

Category of expense (A-I) **B** Date of claim for payment **11 5 2011**
dd mm yyyy

Date claim paid **1 6 2011** Amount £.pp **4255.92**
dd mm yyyy

Supplier (name and address)

Name **NEWS. INT. ADVERTISEMENTS (IRELAND) LTD.**

Address **PO BOX 120**

Town **PETERBOROUGH** County Postcode **PE7 8XT.**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **31** Date expense incurred **1 4 2011** to **5 5 2011**
dd mm yyyy dd mm yyyy

Category of expense (A-I) **D** Date of claim for payment **30 4 2011**
dd mm yyyy dd mm yyyy

Date claim paid **8 5 2011** Amount £.pp **2020.00**
dd mm yyyy

Supplier (name and address)

Name **J C PRINT LTD**

Address **1 THE WILLOWS, UPPER KNOCKBREA ROAD**

Town **BELFAST.** County Postcode **BT6 0PA**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **31** Date expense incurred **5 5 2011**
dd mm yyyy

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

Date claim paid **8 5 2011** Amount £.pp **6476.00**
dd mm yyyy

Supplier (name and address)

Name **J. C PRINT LTD**

Address **1 THE WILLOWS, UPPER KNOCKBREA ROAD**

Town **BELFAST** County Postcode **BT6 0PA**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11**

Election(s) **ASSEMBLY 2011**

No. **32**

Date expense incurred

1 **4** **2011**
dd mm yyyy

to **5** **5** **2011**
dd mm yyyy

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

Date of claim for payment **30** **4** **2011**
dd mm yyyy

Date claim paid **1** **6** **2011**
dd mm yyyy

Amount £.pp **3698.00**

Supplier (name and address)

Name **J C PRINT**

Address **1 THE WILLOWS, UPPER KWOKBREA ROAD**

Town **BELFAST.**

County

Postcode **BT6 0PD**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **33**

Date expense incurred **30** **4** **2011**
dd mm yyyy

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

Date of claim for payment **29** **4** **2011**
dd mm yyyy

Date claim paid **8** **5** **2011**
dd mm yyyy

Amount £.pp **1872.00**

Supplier (name and address)

Name **JOHNSTON PUBLISHING (NI)**

Address **2 ESKY DRIVE**

Town **PORTADOWN**

County

Postcode **BT63 5YY**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **34** Date expense incurred to
dd mm yyyy dd mm yyyy

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

Date claim paid Amount £.pp **2100.00**
dd mm yyyy

Supplier (name and address)
Name **IND NEWS & MEDIA (NI).**
Address **124-144 ROYAL AVENUE**
Town **BELFAST.** County Postcode **BT1 1EB.**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **35** Date expense incurred
dd mm yyyy

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

Date claim paid Amount £.pp **540.00.**
dd mm yyyy

Supplier (name and address)
Name **RNIB**
Address **40 LINENHALL STREET**
Town **BELFAST** County Postcode **BT2 8BA**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6.1.11 - 5.5.11** Election(s) **ASSEMBLY 2011**

No. **36** Date expense incurred to
dd mm yyyy dd mm yyyy

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

Date claim paid Amount £.pp **780-00**
dd mm yyyy

Supplier (name and address)

Name **IRIS COLOUR**

Address **105-109 LIMESTONE ROAD**

Town **BELFAST.** County Postcode **BT15 3AB.**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **37** Date expense incurred
dd mm yyyy

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

Date claim paid Amount £.pp **1000-00**
dd mm yyyy

Supplier (name and address)

Name **MARK THOMPSON DESIGN**

Address **136 SHORE ROAD, BALLYHALBERT.**

Town **NEWTOWARDS** County Postcode **BT22 1BT**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name **DEMOCRATIC UNIONIST PARTY**

Regulated period **6-1-11 - 5-5-11** Election(s) **ASSEMBLY 2011**

No. **38** Date expense incurred to
dd mm yyyy dd mm yyyy

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

Date claim paid Amount £.pp **2000.00.**
dd mm yyyy

Supplier (name and address)

Name **MARK THOMPSON DESIGN**

Address **136 SHORE ROAD, BALLYMARBERT**

Town **NEWTOWNARDS** County Postcode **BT22 1BJ**

Invoice/receipt submitted Yes No (Tick as appropriate)

No. **39.** Date expense incurred
dd mm yyyy

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

Date claim paid Amount £.pp **4000.00.**
dd mm yyyy

Supplier (name and address)

Name **MARK THOMPSON DESIGN**

Address **136 SHORE ROAD, BALLYMARBERT**

Town **NEWTOWNARDS** County Postcode **BT22 1BJ**

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name DEMOCRATIC UNIONIST PARTY

Regulated period 6.1.11 - 5.5.11 Election(s) ASSEMBLY 2011

No. 140 Date expense incurred 14 3 2011
dd mm yyyy

Category of expense (A-I) F Date of claim for payment 14 3 2011
dd mm yyyy

Date claim paid 1 6 2011 Amount £.pp 600.00
dd mm yyyy

Supplier (name and address)

Name DIRECTORY TECHNOLOGIES LTD

Address FOUNTAIN STREET HOUSE, ULVERSTON

Town CUMBRIA County Postcode LA12 7EQ

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 Amount £.pp
dd mm yyyy

Supplier (name and address)

Name

Address

Town County Postcode

Invoice/receipt submitted Yes No (Tick as appropriate)

Party name DEMOCRATIC UNIONIST PARTY

Regulated period 6.1.11 - 5.5.11 Election(s) ASSEMBLY 2011

C2 Notional expenditure – statement of individual items

Number of entries made in this section 1

No. 41 Period/date expense incurred 6 1 2011 to 5 5 2011
dd mm yyyy dd mm yyyy

Category of expense (A-I) J Amount £.pp 500.00

Nature of expenditure Misc ADMINISTRATION

Supplier (name and address)

Name DEMOCRATIC UNIONIST PARTY

Address 91 DUNDENA AVENUE

Town BELFAST County Postcode BT4 3BU

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 DEMOCRATIC UNIONIST PARTY

Regulated period 6.1.11 - 5.5.11 Election(s) ASSEMBLY 2011

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

Category of expense (A-I) Date of invoice

Amount of unpaid claim £.pp

Supplier (name and address)

Name

Address

Town County Postcode

Comments

No. Date expense incurred

Category of expense (A-I) Date of invoice

Amount of unpaid claim £.pp

Supplier (name and address)

Name

Address

Town County Postcode

Comments

Party name

Relevant period Election(s)

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

Party name DEMOCRATIC UNIONIST PARTY

Relevant period 6-1-11 - 5-5-11

Election(s) ASSEMBLY 2011

Section F: Declaration of notional expenditure

I declare that the individual amounts listed below are a fair assessment of the notional expenditure incurred by the party.

| Item number | Item | Value | Supplier's details | Date/period incurred | | |
|-------------|-------|--------|---------------------------|----------------------|----|------|
| | | | | dd | mm | yyyy |
| 41 | ADMIN | 500.00 | DEMOCRATIC UNIONIST PARTY | 6 | 1 | 2011 |
| | | | | 5 | 5 | 2011 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Signed 

Printed name SIMON HAMILTON

Date 28 7 2011
dd mm yyyy

Note: continuation sheets should be used to include each item of notional expenditure reported.

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:

Party and Election Finance
The Electoral Commission
Trevelyan House
30 Great Peter Street
London SW1P 2HW

Tel: 020 7271 0616

Fax: 020 7271 0505

Email: pef@electoralcommission.org.uk

Website: www.electoralcommission.org.uk