

# 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	<input type="text"/>		
Regulated period	<input type="text"/>	Election	<input type="text"/>
Party reference	<input type="text"/>		

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

Printed name	<input type="text"/>
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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

Regulated period

Election(s)

## Section B: Summary of expenditure

### B1 Types of payment

Summary information required (to the nearest £)	Total £
Total payments made	<input type="text"/>
Total of notional expenditure	<input type="text"/>
Total of unpaid claims	<input type="text"/>
Total of disputed claims	<input type="text"/>
Total of above expenditure	<input type="text"/>

### B2 Constituencies/regions contested

Number of constituencies/regions contested

### B3 Categories of expenditure

Summary information required (to the nearest £)	Total £
A. Party political broadcasts	<input type="text"/>
B. Advertising	<input type="text"/>
C. Unsolicited material to electors	<input type="text"/>
D. Manifesto/party policy documents	<input type="text"/>
E. Market research/canvassing	<input type="text"/>
F. Media	<input type="text"/>
G. Transport	<input type="text"/>
H. Rallies and other events	<input type="text"/>
I. Overheads and general administration	<input type="text"/>
Total expenditure	<input type="text"/>

Expenditure should be rounded to the nearest £

Party name

Regulated period

Election(s)

## Section C: payments made

Number of entries made in this section

### C1 Actual payments – statement of individual payments

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)

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

Regulated period

Election(s)

No.  Date expense incurred     to     
dd mm yyyy 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)

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

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

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

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

Relevant period

Election(s)

### 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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signed

Printed name

Date     
dd mm yyyy

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  
3 Bunhill Row  
London EC1Y 8YZ

Tel: 020 7271 0616

Fax: 020 7271 0505

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

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