



# Controlled expenditure return by a recognised third party

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

## A1 Details of recognised third party

Name

Regulated period  Election(s)

Reference number

## 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 by a person authorised under section 90 of the Political Parties, Elections and Referendums Act 2000.

Signed  Date     
dd mm yyyy

Printed name  Responsible person

Please return **all** sections of this return, drawing a bold line through any sections in which there is nothing to report.

## A3 Audited return

Return audited: Yes  No  (tick one)

If applicable:

Name of auditor

Address

Town  County  Postcode

Name  Election  Date

## Section B: Summary of expenditure

### B1 Summary of expenditure incurred

	England £	Scotland £	Wales £	Northern Ireland £	Total £
Total amount of controlled expenditure incurred during the regulated period before becoming a recognised third party*	5,077	562	381	171	6,191
Total of payments made	3,011	333	226	101	3,672
Total of notional expenditure incurred	4,34,406	3008	2582	1162	41,959
Total of unpaid claims	0	0	0	0	0
Total of disputed claims	0	0	0	0	0
<b>Total</b>	<b>42,494</b>	<b>3,903</b>	<b>3,189</b>	<b>1,434</b>	<b>51,822</b>

\*Note: you do not have to provide further details about this expenditure.

### B2 Donation return (TP4 (ii)) attached?

(tick as appropriate)

Yes  No

## Section C: Payments made

### C1 Statement of actual payments

Number of entries made in this section

Item number	<input type="text" value="1"/>	Dates			
Amount (£.pp)	<input type="text" value="2705"/>	Expense incurred	<input type="text" value="2"/>	<input type="text" value="11"/>	<input type="text" value="09"/>
Supplier		Claim for payment	<input type="text" value="7"/>	<input type="text" value="05"/>	<input type="text" value="10"/>
Name	<input type="text" value="LIVIA OLDIAND"/>	Claim paid	<input type="text" value="7"/>	<input type="text" value="05"/>	<input type="text" value="10"/>
			dd	mm	yyyy

Address

Town

Part(s) of United Kingdom to which expenditure relates

England  Scotland  Wales  Northern Ireland

Invoice/receipt submitted Yes  No  (tick as appropriate)

Name  Election  Date

Item number  Dates

Amount (£.pp)  Expense incurred

Supplier Claim for payment

Supplier Name  Claim paid     
dd mm yyyy

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates  
England  Scotland  Wales  Northern Ireland

Invoice/receipt submitted Yes  No  (tick as appropriate)

Item number  Dates

Amount (£.pp)  Expense incurred

Supplier Claim for payment

Supplier Name  Claim paid     
dd mm yyyy

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates  
England  Scotland  Wales  Northern Ireland

Invoice/receipt submitted Yes  No  (tick as appropriate)

Name  Election  Date

Item number  Dates

Amount (£.pp)  Expense incurred

Supplier Claim for payment

Supplier Name  Claim paid     
dd mm yyyy

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates  
England  Scotland  Wales  Northern Ireland

Invoice/receipt submitted Yes  No  (tick as appropriate)

Item number

Amount (£.pp)  Expense incurred

Supplier Claim for payment

Supplier Name  Claim paid     
dd mm yyyy

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates  
England  Scotland  Wales  Northern Ireland

Invoice/receipt submitted Yes  No  (tick as appropriate)

C2 Statement of notional expenditure

Number of entries made in this section

4

Item number

1

Nature of expenditure

MEDIA RELATIONS FOR

Value (£.pp)

35,000.00

INDEPENDENT NETWORK, INCLUDING PRESS RELEASES AND MEDIA LAUNCH

Period/date expense incurred

01  
dd

02  
mm

2009  
yyyy

to

06  
dd

05  
mm

2010  
yyyy

Supplier

Name

PARKER, WAYNE AND KENT

Address

39-41 NORTH ROAD

Town

LONDON

County

Postcode

N7 9DP

Part(s) of United Kingdom to which expenditure relates

England

28,700

Scotland

3,177

Wales

2,153

Northern Ireland

769.

Declaration submitted if over £200\*

Yes

No

(tick as appropriate)

\*A declaration signed by the responsible person must be provided in respect of the amount of each item with a value exceeding £200

Item number

2

Nature of expenditure

OFFICE SPACE,

Value (£.pp)

2,675

PRINTING AND COMPUTER HIRE TELEPHONE

Period/date expense incurred

01  
dd

02  
mm

2009  
yyyy

to

06  
dd

05  
mm

2010  
yyyy

Supplier

Name

PARKER, WAYNE AND KENT

Address

39-41 NORTH ROAD

LONDON

Town

LONDON

County

Postcode

N7 9DP

Part(s) of United Kingdom to which expenditure relates

England

2,194

Scotland

243

Wales

165

Northern Ireland

74

Declaration submitted if over £200\*

Yes

No

(tick as appropriate)

\*A declaration signed by the Responsible Person must be provided in respect of the amount of each item with a value exceeding £200

Item number  Nature of expenditure   
Value (£.pp)

Period/date expense incurred    to     
dd mm yyyy dd mm yyyy

Supplier

Name

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates

England  Scotland  Wales  Northern Ireland

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

\*A declaration signed by the Responsible Person must be provided in respect of the amount of each item with a value exceeding £200

Item number  Nature of expenditure   
Value (£.pp)

Period/date expense incurred    to     
dd mm yyyy dd mm yyyy

Supplier

Name

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates

England  Scotland  Wales  Northern Ireland

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

\*A declaration signed by the Responsible Person must be provided in respect of the amount of each item with a value exceeding £200

Name  Election  Date

**Section D: Statement of unpaid claims**  
(where an application has, or is about to be, made to a court under S.92(4) of the PPERA 2000)

Number of entries made in this section

Item number

Amount of unpaid claim

Supplier Name

Address

Part(s) of United Kingdom to which expenditure relates

Town  County  Postcode

England  Scotland  Wales  Northern Ireland

Comments

Expense incurred

Invoice

Dates

dd mm yyyy

Item number

Amount of unpaid claim

Supplier Name

Address

Part(s) of United Kingdom to which expenditure relates

Town  County  Postcode

England  Scotland  Wales  Northern Ireland

Comments

Expense incurred

Invoice

Dates

dd mm yyyy

Name  Election  Date

### Section E: Statement of disputed claims

Number of entries made in this section

Item number

Amount of disputed claim

Supplier

Name

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates

England  Scotland  Wales  Northern Ireland

Comments

Dates

Disputed claim

Invoice

dd mm yyyy

Item number

Amount of disputed claim

Supplier

Name

Address

Town  County  Postcode

Part(s) of United Kingdom to which expenditure relates

England  Scotland  Wales  Northern Ireland

Comments

Dates

Disputed claim

Invoice

dd mm yyyy



For Electoral Commission use only

Date of receipt	<input type="text"/> dd	<input type="text"/> mm	<input type="text"/> yyyy	Checked by	<input type="text"/>
Date entered in database	<input type="text"/> dd	<input type="text"/> mm	<input type="text"/> yyyy	Checked by	<input type="text"/>
Date entered in website	<input type="text"/> dd	<input type="text"/> mm	<input type="text"/> yyyy	File reference	<input type="text"/> <input type="text"/>

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

E-mail: [pef@electoralcommission.org.uk](mailto:pef@electoralcommission.org.uk)

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