

Canadian Football Federation

Tax Returns

2005 - 2010



REGISTERED CANADIAN AMATEUR ATHLETIC ASSOCIATION RETURN OF INFORMATION

000001

OTTAWA ON K1A 0L5

Return for Fiscal Period ended		
2 0 0 5	1 1	3 0
Year	Month	Day
Is this the first return filed by this association?		
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
If "No", has the fiscal period changed from the last return filed?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Is this the final return to be filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "Yes", please attach an explanation.		

CANADIAN FOOTBALL FEDERATION
~~1500 WEST GEORGIA STREET~~
~~SUITE 790~~
 VANCOUVER, BC / K6G 2Z6

Received By / Reçu Par
 Records operations Section /
 Charities unit



Opérations de Soutien à la gestion
 des dossiers / Unité des organismes de



15 899144109 RR 0003 2005-11-30 3028520

bienfaisances

If the name or address shown above is incorrect or a more permanent address can be provided, print the necessary corrections below:

Corrected Name

Corrected Address (Number, Street, Apt. No., P.O. Box or F.R. No.)

Suite 1555 - 1055 West Georgia Street, Box 62

Vancouver

Province

British Columbia

Postal Code
 V 6 G 2 Z 6

NOTE:

To minimize the possibility of the annual mailing of the personalized Registered Canadian Amateur Athletic Association Return of Information going astray, it is important that, where possible, a permanent mailing address be provided (i.e., address of the actual, physical location of the association or permanent P.O. Box number).

Instructions

1. Ensure that the name and address are correct. To correct pre-printed information on this form, please use the area provided. Any changes (except address) must be explained in an attachment to this return.
2. Complete the boxes (above right) to indicate the end of the association's fiscal period.
3. Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of receipts and disbursements for the fiscal period and a statement of assets and liabilities as of the end of the fiscal period. The statements should indicate the different sources of revenue and sufficient details to show how funds were spent or invested.
4. Attach a list of the names, addresses, and occupations or lines of business of the association's current directors.
5. Attach a list of the names of the people, including their official positions, who are authorized to issue official receipts for the association.
6. Attach a note which fully explains what replacement procedure is followed in the event of lost or spoiled receipts.
7. Mail or deliver one completed return, within six months from the end of the fiscal period of the association, TOGETHER WITH THE REQUIRED FINANCIAL STATEMENTS to:

Charities Directorate
 Canada Customs and Revenue Agency
 Ottawa ON K1A 0L5

Information Required

1. Have any changes not previously reported been made in the association's governing documents? If yes, please attach a certified copy of the changes. Yes No
2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If no, please attach an explanation. Yes No
3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 0.00
4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration Number? If no, please attach an explanation. Yes No
5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If yes, please attach an explanation. Yes No
6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If yes, please attach a list of these gifts and their value as shown on the official donation receipt. Yes No
7. Has any amount donated to the association been returned to the donor during the year? If yes, please attach an explanation. Yes No
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If yes, please attach an explanation. Yes No
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes No

Certification

To be signed by two directors of the association

1. I, Bob Lenarduzzi of _____
Name of director whose signature appears below. (Print)

2. I, John Bromley of _____
Name of director whose signature appears below. (Print)

Address

HEREBY CERTIFY that the information given in this return and in all statements attached is, to the best of my knowledge, correct and complete.
 (Note: It is a serious offense to make false or deceptive statements.)

Position with the Association
 Director

Position with the Association
 Director



Canada Customs and Revenue Agency

Agence des douanes et du revenu du Canada

REGISTERED CANADIAN AMATEUR ATHLETIC ASSOCIATION RETURN OF INFORMATION

000001

OTTAWA ON K1A 0L5

Return for Fiscal Period ended		
2 1 0 1 6	1 1 1	3 1 0
Year	Month	Day
Is this the first return filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "No", has the fiscal period changed from the last return filed?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is this the final return to be filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "Yes", please attach an explanation.		

CANADIAN FOOTBALL FEDERATION
SUITE 1555
1055 WEST GEORGIA ST. BOX 62
VANCOUVER BC V6G 2Z6



15 899144109 RR 0003 2006-11-30 3028520

If the name or address shown above is incorrect or a more permanent address can be provided, print the necessary corrections below:

Corrected Name

Corrected Address (Number, Street, Apt. No., P.O. Box or R.R. No.)

City

Province

Postal Code

NOTE:

To minimize the possibility of the annual mailing of the personalized Registered Canadian Amateur Athletic Association Return of Information going astray, it is important that, where possible, a permanent mailing address be provided (i.e., address of the actual, physical location of the association or permanent P.O. Box number).

Instructions

1. Ensure that the name and address are correct. To correct pre-printed information on this form, please use the area provided. Any changes (except address) must be explained in an attachment.

Use the boxes (above right) to indicate the end of the association's fiscal period.

Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a list of receipts and disbursements for the fiscal period and a statement of assets and liabilities at the end of the fiscal period. The statements should indicate the different sources of funds and sufficient details to show how funds were spent or invested.

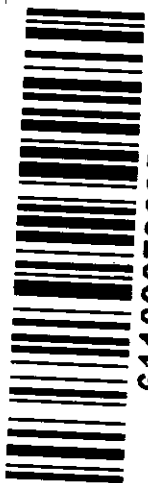
Provide a list of the names, addresses, and occupations or lines of business of the association's directors.

Provide a list of the names of the people, including their official positions, who are authorized to issue receipts for the association.

Provide a note which fully explains what replacement procedure is followed in the event of lost or stolen receipts.

Deliver one completed return, within six months from the end of the fiscal period of the association, TOGETHER WITH THE REQUIRED FINANCIAL STATEMENTS to:

Charities Directorate
Canada Customs and Revenue Agency
Ottawa ON K1A 0L5



6110007920570

Information Required

- 1. Have any changes not previously reported been made in the association's governing documents? If yes, please attach a certified copy of the changes. Yes No
- 2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If no, please attach an explanation. Yes No
- 3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 0.00
- 4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration Number? If no, please attach an explanation. Yes No
- 5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If yes, please attach an explanation. Yes No
- 6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If yes, please attach a list of these gifts and their value as shown on the official donation receipt. Yes No
- 7. Has any amount donated to the association been returned to the donor during the year? If yes, please attach an explanation. Yes No
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If yes, please attach an explanation. Yes No
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes No

Certification

To be signed by two directors of the association

- 1. I, Bob Lenarduzzi of [Redacted]
Name of director whose signature appears below. (Print) Address
- 2. I, John Bromley of [Redacted]
Name of director whose signature appears below. (Print) Address

HEREBY CERTIFY that the information given in this return and in all statements attached is, to the best of my knowledge, correct and complete.
(Note: It is a serious offense to make false or deceptive statements.)

[Redacted Signature Area]	Position with the Association Director
	Position with the Association Director



Canada Revenue Agency

Agence du revenu du Canada

Received By / Reçu Par
 Records operations Section /
 Charities unit
REGISTERED CANADIAN AMATEUR ATHLETIC ASSOCIATION INFORMATION RETURN

Identification

Name of Association
 CANADIAN FOOTBALL FEDERATION

Address
 BOX 62, SUITE 1555, 1500 WEST GEORGIA STREET

City

Province or territory
 BRITISH COLUMBIA

Postal code
 V6G 2Z6

Opérations de Soutien à la gestion
 des dossiers / Unité des organismes de
 bienfaisances

Return for Fiscal Period Ending

2007	11	30
Year	Month	Day

Is this the first return filed by this association?
 Yes No

If "No", has the fiscal period changed from the last return filed?
 Yes No

Is this the final return to be filed by this association?
 Yes No

If "Yes", please attach an explanation.

File number
 3028520

BN/Registration number
 899144109 RR 0003

Instructions

1. Complete the Identification area.
2. Complete the boxes (above right) to indicate the end of the association's fiscal period.
3. Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of revenue and expenditures for the fiscal period and a statement of assets and liabilities as of the end of the fiscal period. The statements should indicate the different sources of revenue in sufficient detail to show how funds were spent or invested.



6110007920571

st of the names, addresses, and occupations or lines of business of the association's
 ctors.

st of the names and the official positions of the people who are authorized to issue official
 r the association.

ote that fully explains what replacement procedure is followed in the event of lost or
 ceipts.

months from the end of the fiscal period of the association, mail or deliver a completed
 l all required documents to:

Charities Directorate
 Canada Revenue Agency
 Ottawa ON K1A 0L5

existe en français)

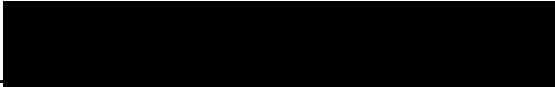


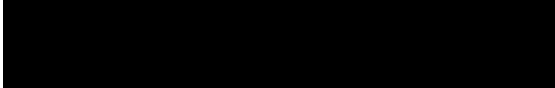
Information Required

1. Have any changes not previously reported been made to the association's governing documents? If yes, please attach a certified copy of the changes. Yes No
2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If no, please attach an explanation. Yes No
3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 0.00
4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration number? If no, please attach an explanation. Yes No
5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If yes, please attach an explanation. Yes No
6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If yes, please attach a list of these gifts and their value as shown on the official donation receipt. Yes No
7. Has any amount donated to the association been returned to the donor during the year? If yes, please attach an explanation. Yes No
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If yes, please attach an explanation. Yes No
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes No

Certification

To be signed by two directors of the association

1. I, BOB LENARDUZZI of 
Name of director whose signature appears below.

2. I, JOHN BROMLEY of 
Name of director whose signature appears below.

Address

HEREBY CERTIFY that the information given in this return and in all attachments is, to be best of my knowledge, correct, complete and current. (Note: It is a serious offense under the *Income Tax Act* to provide false or deceptive information.)

Position with the association

DIRECTOR

Position with the association

DIRECTOR



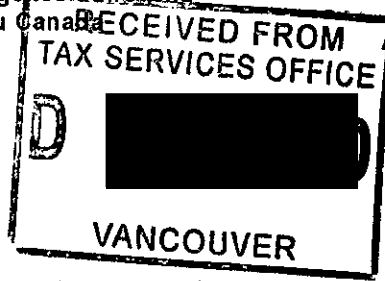
Canada Revenue Agency

Agence du revenu du Canada

REGISTERED CANADIAN AMATEUR ATHLETIC ASSOCIATION INFORMATION RETURN

000001

OTTAWA ON K1A 0L5

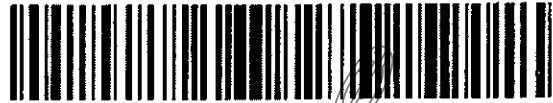


Return for Fiscal Period Ending 20081130. Is this the first return filed by this association? No. If 'No', has the fiscal period changed from the last return filed? No. Is this the final return to be filed by this association? No.

588

CANADIAN FOOTBALL FEDERATION SUITE 1555 1055 WEST GEORGIA ST. BOX 62 VANCOUVER BC V6G 2Z6

Received By / Reçu Par Records operations Section / Charities unit



Opérations de Soutien à la gestion des dossiers / Unité des organismes de charités

15 899144109 RR 0003 2008-11-30 3028520

If the name or address shown above is incorrect or a more permanent address can be provided, print the necessary corrections below:

Corrected name

Corrected address (Number, Street, Apt. No., P.O. Box or R.R. No.)

SUITE 1555 1500 WEST GEORGIA ST BOX 62

City VANCOUVER BC

Province or territory

BC

Postal code

V6G 2Z6

NOTE:

To minimize the possibility of the annual mailing of the personalized Registered Canadian Amateur Athletic Association Information Return going astray, it is important that, where possible, a permanent mailing address be provided (i.e., address of the actual, physical location of the association or permanent P.O. Box number).

Instructions

1. Ensure that the name and address are correct. To correct pre-printed information on this form, please use the area provided. Any changes (except to the contact information above) must be in an attachment to this return.

the boxes (above right) to indicate the end of the association's fiscal period.

FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include amount of revenue and expenditures for the fiscal period and a statement of assets and liabilities at the end of the fiscal period. The statements should indicate the different sources of revenue in detail to show how funds were spent or invested.

List of the names, addresses, and occupations or lines of business of the association's directors.

List of the names and the official positions of the people who are authorized to issue official receipts for the association.

Note that fully explains what replacement procedure is followed in the event of lost or destroyed receipts.

Within 30 months from the end of the fiscal period of the association, mail or deliver a completed return and all required documents to:

Charities Directorate Canada Revenue Agency Ottawa ON K1A 0L5



6110007920574

Information Required

- 1. Have any changes not previously reported been made in the association's governing documents? If *yes*, please attach a certified copy of the changes. Yes No
- 2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If *no*, please attach an explanation. Yes No
- 3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 0
- 4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration Number? If *no*, please attach an explanation. Yes No
- 5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If *yes*, please attach an explanation. Yes No
- 6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If *yes*, please attach a list of these gifts and their value as shown on the official donation receipt. Yes No
- 7. Has any amount donated to the association been returned to the donor during the year? If *yes*, please attach an explanation. Yes No
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If *yes*, please attach an explanation. Yes No
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes No

Certification

To be signed by two directors of the association

1. I, BOB LENARDUZZI of _____
Name of director whose signature appears below. (Print)

2. I, JOHN BROMLEY of _____
Name of director whose signature appears below. (Print)

Address

HEREBY CERTIFY that the information given in this return and in all statements attached is, to the best of my knowledge, correct and complete.
(Note: It is a serious offense to make false or deceptive statements.)

Signature

Position with the Association

DIRECTOR

Signature

Position with the Association

DIRECTOR

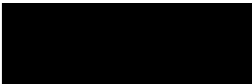


OTTAWA ON K1A 0L5

REGISTERED CANADIAN AMATEUR ATHLETIC ASSOCIATION INFORMATION RETURN

000001

CANADIAN FOOTBALL FEDERATION
 1500 WEST GEORGIA ST
 SUITE 1555 BOX 62
 Vancouver BC V6G 2Z6
 Received By / Reçu Par
 Records operations Section /
 Charities unit



15 899144109 RR 0003 2009-11-30 3028520

Return for Fiscal Period Ending		
2	0	9
Year		11
		30
		Day
Is this the first return filed by this association?		
Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>
If "No", has the fiscal period changed from the last return filed?		
Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>
Is this the final return to be filed by this association?		
Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>
If "Yes", please attach an explanation.		

Opérations de Soutien à la gestion

if the name of the association shown in the permanent address can be provided, print the necessary corrections below:
 Des corrections doivent être indiquées si le nom de l'association dans l'adresse permanente peut être fourni.

Corrected name

Corrected address (Number, Street, Apt. No., P.O. Box or R.R. No.)

Province or territory

Postal code

NOTE:

To minimize the possibility of the annual mailing of the personalized Registered Canadian Amateur Athletic Association Information Return going astray, it is important that, where possible, a permanent mailing address be provided (i.e., address of the actual, physical location of the association or permanent P.O. Box number).

6110007920539



Instructions

1. Ensure that the name and address are correct. To correct pre-printed information on this form, please use the area provided. Any changes (except to the contact information above) must be explained in an attachment to this return.
2. Complete the boxes (above right) to indicate the end of the association's fiscal period.
3. Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of revenue and expenditures for the fiscal period and a statement of assets and liabilities as of the end of the fiscal period. The statements should indicate the different sources of revenue in sufficient detail to show how funds were spent or invested.
4. Attach a list of the names, addresses, and occupations or lines of business of the association's current directors.
5. Attach a list of the names and the official positions of the people who are authorized to issue official receipts for the association.
6. Attach a note that fully explains what replacement procedure is followed in the event of lost or spoiled receipts.
7. Within six months from the end of the fiscal period of the association, mail or deliver a completed return and all required documents to:

Charities Directorate
 Canada Revenue Agency
 Ottawa ON K1A 0L5

Information Required

- 1. Have any changes not previously reported been made in the association's governing documents? If *yes*, please attach a certified copy of the changes. Yes No
- 2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If *no*, please attach an explanation. Yes No
- 3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 0
- 4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration Number? If *no*, please attach an explanation. Yes No
- 5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If *yes*, please attach an explanation. Yes No
- 6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If *yes*, please attach a list of these gifts and their value as shown on the official donation receipt. Yes No
- 7. Has any amount donated to the association been returned to the donor during the year? If *yes*, please attach an explanation. Yes No
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If *yes*, please attach an explanation. Yes No
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes No

Certification

To be signed by two directors of the association

1. I, ROBERT LENARDURZI of [Redacted] Address

2. I, GREG KERFOOT of [Redacted] Address

HEREBY CERTIFY that the information given in this return and in all statements attached is, to the best of my knowledge, correct and complete.
(Note: It is a serious offense to make false or deceptive statements.)

[Redacted] Position with the Association
DIRECTOR

[Redacted] Position with the Association
DIRECTOR



Canada Revenue Agency

Agence du revenu du Canada

3028520

REGISTERED CANADIAN AMATEUR ATHLETIC ASSOCIATION INFORMATION RETURN

Identification

Name of Association
CANADIAN FOOTBALL FEDERATION

Address SUITE 1555
1500 WEST GEORGIA STREET, BOX 62

City
VANCOUVER

Province or territory
British Columbia

Postal code
V6G 2Z6

Return for Fiscal Period Ending		
2010	11	30
Year	Month	Day
Is this the first return filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "No", has the fiscal period changed from the last return filed?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is this the final return to be filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "Yes", please attach an explanation.		
File number		
BN/Registration number		
899144109	RR	0003

NCR MAILROOM
37
[REDACTED]
SALLE DU COURRIER
RCN

Instructions

1. Complete the Identification area.
2. Complete the boxes (above right) to indicate the end of the association's fiscal period.
3. Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of revenue and expenditures for the fiscal period and a statement of assets and liabilities as of the end of the fiscal period. The statements should indicate the different sources of revenue in sufficient detail to show how funds were spent or invested.
4. Attach a list of the names, addresses, and occupations or lines of business of the association's current directors.
5. Attach a list of the names and the official positions of the people who are authorized to issue official receipts for the association.

Note that fully explains what replacement procedure is followed in the event of lost or receipts.

months from the end of the fiscal period of the association, mail or deliver a completed and all required documents to:

Charities Directorate
Canada Revenue Agency
Ottawa ON K1A 0L5

existe en français)



CANADA REVENUE AGENCY
[REDACTED]
SURREY TAX CENTRE



Information Required

- 1. Have any changes not previously reported been made to the association's governing documents? If yes, please attach a certified copy of the changes. Yes No
- 2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If no, please attach an explanation. Yes No
- 3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$ 0
- 4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration number? If no, please attach an explanation. Yes No
- 5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If yes, please attach an explanation. Yes No
- 6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If yes, please attach a list of these gifts and their value as shown on the official donation receipt. Yes No
- 7. Has any amount donated to the association been returned to the donor during the year? If yes, please attach an explanation. Yes No
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If yes, please attach an explanation. Yes No
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes No

Certification

To be signed by two directors of the association

- 1. I, ROBERT LENARDUZZI of [REDACTED]
Name of director whose signature appears below. Address
- 2. I, JOHN BROMLEY of [REDACTED]
Name of director whose signature appears below. Address

HEREBY CERTIFY that the information given in this return and in all attachments is, to be best of my knowledge, correct, complete and current. (Note: It is a serious offense under the *Income Tax Act* to provide false or deceptive information.)

[REDACTED]	Position with the association DIRECTOR
[REDACTED]	Position with the association DIRECTOR