U.S. Department of Justice
Washington, DC 20530

Supplemental Statement
Pursuant to Section 2 of the Foreign Agents Registration Act of 1938, as amended

OMB NO. 1105-0002

For Six Month Period Ending DEC 18 2008
(Insert date)

I - REGISTRANT

1. (a) Name of Registrant

Nova Scotia Information Centre

(b) Registration No. 3078

(c) Business Address(es) of Registrant

468 Commercial Street
Portland, ME 04101

2. Has there been a change in the information previously furnished in connection with the following:

(a)	If an individual:		
	(1) Residence address	Yes ☐	No ☐
	(2) Citizenship	Yes ☐	No ☐
	(3) Occupation	Yes ☐	No ☐
(b)	If an organization:		
	(1) Name	Yes ☐	No ☒
	(2) Ownership or control	Yes ☐	No ☒
	(3) Branch offices	Yes ☐	No ☒

(c) Explain fully all changes, if any, indicated in items (a) and (b) above.

RECEIVED
2008 DEC 23 PM 2:03
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON FIELD OFFICE

IF THE REGISTRANT IS AN INDIVIDUAL, OMIT RESPONSE TO ITEMS 3, 4, AND 5(a).

3. If you have previously filed Exhibit C[1], state whether any changes therein have occurred during this 6 month reporting period.

Yes ☐ No ☒

If yes, have you filed an amendment to the Exhibit C? Yes ☐ No ☐

If no, please attach the required amendment.

1 The Exhibit C, for which no printed form is provided, consists of a true copy of the charter, articles of incorporation, association, and by laws of a registrant that is an organization. (a waiver of the requirement to file an Exhibit C may be obtained for good cause upon written application to the Assistant Attorney General, Criminal Division, Internal Security Section, U.S. Department of Justice, Washington, D.C. 20530.)

4. (a) Have any persons ceased acting as partners, officers, directors or similar officials of the registrant during this 6 month reporting period? Yes ☒ No ☐

If yes, furnish the following information:

Name	Position	Date Connection Ended

(b) Have any persons become partners, officers, directors or similar officials during this 6 month reporting period? Yes ☐ No ☒

If yes, furnish the following information:

Name	Residence Address	Citizenship	Position	Date Assumed

5. (a) Has any person named in item 4(b) rendered services directly in furtherance of the interests of any foreign principal? N/A Yes ☐ No ☐

If yes, identify each such person and describe his service.

(b) Have any employee or individuals, who have filed a short form registration statement, terminated their employment or connection with the registrant during this 6 month reporting? Yes ☐ No ☐

If yes, furnish the following information:

Name	Position or connection	Date terminated

(c) During this six month reporting period, have the registrant hired as employees or in any other capacity, any persons who rendered or will render services to the registrant directly in furtherance of the interests of any foreign principal(s) in other than a clerical or secretarial, or in a related or similar capacity? Yes ☐ No ☒

If yes, furnish the following information:

Name	Residence Address	Citizenship	Position	Date Assumed

6. Have short form registration statements been filed by all of the persons named in Items 5(a) and 5(c) of the supplemental statement? N/A Yes ☐ No ☐

If no, list names of persons who have not filed the required statement.

II - FOREIGN PRINCIPAL

7. Has your connection with any foreign principal ended during this 6 month reporting period?
Yes ☐ No ☑

If yes, furnish the following information:

Name of foreign principal *Date of termination*

8. Have you acquired any new foreign principal[2] during this 6 month reporting period?
Yes ☐ No ☑

If yes, furnish following information:

Name and address of foreign principal *Date acquired*

9. In addition to those named in Items 7 and 8, if any, list foreign principals[2] whom you continued to represent during the 6 month reporting period.

This office is funded and operated by the Nova Scotia Department of Tourism & Culture, Province of Nova Scotia.

10. **EXHIBITS A AND B**

(a) Have you filed for each of the newly acquired foreign principals in Item 8 the following:

Exhibit A[3] Yes ☐ No ☐
Exhibit B[4] Yes ☐ No ☐

N/A

If no, please attach the required exhibit.

(b) Have there been any changes in the Exhibits A and B previously filed for any foreign principal whom you represented during this six month period? Yes ☐ No ☐

If yes, have you filed an amendment to these exhibits? Yes ☐ No ☐

If no, please attach the required amendment.

2 The term "foreign principal" includes, in addition to those defined in section 1(b) of the Act, an individual organization any of whose activities are directly or indirectly supervised, directed, controlled, financed, or subsidized in whole or in major part by a foreign government, foreign political party, foreign organization or foreign individual. (See Rule 100(a) (9)). A registrant who represents more than one foreign principal is required to list in the statements he files under the Act only those principals for whom he is not entitled to claim exemption under Section 3 of the Act. (See Rule 208.)
3 The Exhibit A, which is filed on form CRM-157 (Formerly OBD-67) sets forth the information required to be disclosed concerning each foreign principal.
4 The Exhibit B, which is filed on Form CRM-155 (Formerly OBD-65) sets fourth the information concerning the agreement or understanding between the registrant and the foreign principal.

III - ACTIVITIES

11. During this 6 month reporting period, have you engaged in any activities for or rendered any services to any fo n principal named in Items 7, 8, and 9 of this statement? Yes ☒ No ☐

If yes, identify each such foreign principal and describe in full detail your activities and services:

Sadie Thomas-Frye represented the Province of Nova Scotia at travel trade events. They are as follows:

September 6	AAA Northern New York Consumer travel show	
	Syracuse, NY Registration fee $75.00	travel costs $740.75
October 27-28	Conway Tours Group Leader travel show	
	Pawtucket, RI Registration fee $422.50	travel costs $330.18
November 13-18	National Tour Association Annual Convention	
	Charlotte, NC Reistration fee $1005.00	travel costs $1414.50

12. During this 6 month reporting period, have you on behalf of any foreign principal engaged in political activity[5] as defined below? Yes ☐ No ☒

If yes, identify each such foreign principal and describe in full detail all such political activity, indicating, among other things, the relations, interests and policies sought to be influenced and the means employed to achieve this purpose. If the registrant arranged, sponsored or delivered speeches, lectures or radio and TV broadcasts, give details as to dates, places, of delivery, names of speakers and subject matter.

13. In addition to the above described activities, if any, have you engaged in activity on your own behalf which benefits any or all of your foreign principals? Yes ☐ No ☒

If yes, describe fully.

5 The term "political activities" means any activity that the person engaging in believes will, or that the person intends to, in any way influence any agency or official of the Government of the United States or any section of the public within the United States with reference to formulating, adopting or changing the domestic or foreign policies of the United States or with reference to political or public interests, policies, or relations of a government aforeign country or a foreign political party.

IV - FINANCIAL INFORMATION

14. (a) **RECEIPTS-MONIES**

During this 6 month reporting period, have you received from any foreign principal named in Items 7, 8, and 9 of this statement, or from any other source, for or in the interests of any such foreign principal, any contributions, income or money either as compensation or otherwise? Yes ☐ No ☐

If no, explain why.

If yes, set forth below in the required detail and separately for each foreign principal an account of such monies[6]

Date	From Whom	Purpose	Amount

The Province of Nova Scotia reimburses the Nova Scotia Information Centre for its general operational expenses. Please refer to attached sheets for a breakdown of expenditures and the bank statements for deposits (reimbursements to account).

Reimbursements total (deposits) 7633.78 U.S. Total

(b) **RECEIPTS - FUND RASING CAMPAIGN**

During this 6 month reporting period, have you received, as part of a fund raising campaign[7], any money on behalf of any foreign principal named in items 7, 8, and 9 of this statement? Yes ☐ No ☒

If yes, have you filed an Exhibit D to your registration? Yes ☐ No ☐

If yes, indicate the date the Exhibit D was filed. Date _____.

(c) **RECEIPTS-THINGS OF VALUE**

During this 6 month reporting period, have you received any thing of value[9] other than money from any foreign principal named in Items 7, 8, and 9 of this statement, or from any other source, for or in the interests of any such foreign principal?
Yes ☐ No ☒

If yes, furnish the following information:

Name of foreign principal	Date received	Description of thing of value	Purpose

6, 7 A registrant is required to file an Exhibit D if he collects or receives contributions, loans, money, or other things of value for a foreign principal, as part of a fund raising campaign. (See Rule 201(e).)
8 An Exhibit D, for which no printed form is provided, sets forth an account of money collected or received as a result of a fund raising campaign and transmitted for a foreign principal.
9 Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks," and the like.

15. (a) **DISBURSEMENTS-MONIES**

During this 6 month reporting period, have you

(1) disbursed or expended monies in connection with activity on behalf of any foreign principal named in Items 7, 8, and 9 of this statement? Yes ☑ No ☐

(2) transmitted monies to any such foreign principal? Yes ☐ No ☑

If no, explain in full detail why there were no disbursements made on behalf of any foreign principal.

If yes, set forth below in the required detail and separately for each foreign principal an account of such monies, including monies transmitted, if any, to each foreign principal.

Date	To Whom	Purpose	Amount

This office maintains an operating account to pay for services and general supplies such as postage, printing and telephone. The Province of Nova Scotia reimburses the offices for such expeditures. Please find attached the month bank statements and petty cash statements for the months of July - November 2003.

Total

(b) **DISBURSEMENTS-THINGS OF VALUE**

During this 6 month reporting period, have you disposed of anything of value[10] other than money in furtherance of or in connection with activities on behalf of any foreign principal named in Items 7, 8, and 9 of this statement?

Yes ☐ No ☒

If yes, furnish the following information:

Date disposed	Name of person to whom given	On behalf of what foreign principal	Description of thing of value	Purpose
N/A				

(c) **DISBURSEMENTS-POLITICAL CONTRIBUTIONS**

During this 6 month reporting period, have you from your own funds and on your own behalf either directly or through any other person, made any contributions of money or other things of value[11] in connection with an election to any political office, or in connection with any primary election, convention, or caucus held to select candidates for political office? Yes ☐ No ☒

If yes, furnish the following information:

Date	Amount or thing of value	Name of political organization	Name of candidate
N/A			

10, 11 Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks" and the like.

V - INFORMATIONAL MATERIALS

16. During this 6 month reporting period, did you prepare, disseminate or cause to be disseminated any informational materials[12]?
Yes ☑ No ☐

IF YES, RESPOND TO THE REMAINING ITEMS IN SECTION V.

17. Identify each such foreign principal.

On behalf of the Nova Scotia Department of Tourism & Culture, mailed travel literature to interested parties.

18. During this 6 month reporting period, has any foreign principal established a budget or allocated a specified sum of money to finance your activities in preparing or disseminating informational materials? Yes ☐ No ☐

If yes, identify each such foreign principal, specify amount, and indicate for what period of time.

Please find budget enclosed.

19. During this 6 month reporting period, did your activities in preparing, disseminating or causing the dissemination of informational materials include the use of any of the following:

☐ Radio or TV broadcasts
☐ Magazine or newspaper articles
☐ Motion picture films
☐ Letters or telegrams
☐ Advertising campaigns
☐ Press releases
☐ Pamphlets or other publications
☐ Lectures or speeches
☐ Internet
☐ Other (specify) _____

20. During this 6 month reporting period, did you disseminate or cause to be disseminated informational materials among any of the following groups:

☐ Public Officials
☐ Legislators
☐ Government agencies
☐ Newspapers
☐ Editors
☐ Civic groups or associations
☐ Libraries
☐ Educational institutions
☐ Nationality groups
☐ Other (specify) Fulfilled requests for travel information

21. What language was used in the informational materials:
☑ English ☐ Other (specify) _____

22. Did you file with the Registration Unit, U.S. Department of Justice a copy of each item of such informational materials disseminated or caused to be disseminated during this 6 month reporting period? Yes ☑ No ☐

23. Did you label each item of such informational materials with the statement required by Section 4(b) of the Act?
Yes ☑ No ☐

12 The term informational materials includes any oral, visual, graphic, written, or pictorial information or matter of any kind, including that published by means of advertising, books, periodicals, newspapers, lectures, broadcasts, motion pictures, or any means or instrumentality of interstate or foreign commerce or otherwise. Informational materials disseminated by an agent of a foreign principal as part of an activity in itself exempt from registration, or an activity which by itself would not require registration, need not be filed pursuant to Section 4(b) of the Act.

VI--EXECUTION

In accordance with 28 U.S.C. § 1746, the undersigned swear(s) or affirm(s) under penalty of perjury that he/she has (they have) read the information set forth in this registration statement and the attached exhibits and that he/she is (they are) familiar with the contents thereof and that such contents are in their entirety true and accurate to the best of his/her (their) knowledge and belief, except that the undersigned make(s) no representation as to truth or accuracy of the information contained in the attached Short Form Registration Statement(s), if any, insofar as such information is not within his/her (their) personal knowledge.

(Date of signature)	(Type or print name under each signature[13])
January 14, 2004	Robert W. Boyd
	ROBERT W. BOYD

SECURITIES AND EXCHANGE COMMISSION
REGISTRATION UNIT
2004 JAN 20 PM 3:27

13 This statement shall be signed by the individual agent, if the registrant is an individual, or by a majority of those partners, officers, directors or persons performing similar functions, if the registrant is an organization, except that the organization can, by power of attorney, authorize one or more individuals to execute this statement on its behalf.

UNITED STATES DEPARTMENT OF JUSTICE
FARA REGISTRATION UNIT
CRIMINAL DIVISION
WASHINGTON, D.C. 20530

NOTICE

Please answer the following questions and return this sheet in triplicate with your Supplemental Statement:

1. Is your answer to Item 16 of Section V (Informational Materials - page 8 of Form CRM-154, formerly Form OBD-64-Supplemental Statement):

YES ✓ **or NO** _____

(If your answer to question 1 is "yes" do not answer question 2 of this form.)

2. Do you disseminate any material in connection with your registration:

YES _____ **or NO** _____

(If your answer to question 2 is "yes" please forward for our review copies of all material including: films, film catalogs, posters, brochures, press releases, etc. which you have disseminated during the past six months.)

Robert W. Boyd
Signature

Jan 14/04
Date

ROBERT W. BOYD
Please type or print name of signatory on the line above

Manager Visitor Services + Research
Title

THIS FORM IS TO BE AN OFFICIAL ATTACHMENT TO YOUR CURRENT SUPPLEMENTAL STATEMENT - PLEASE EXECUTE IN TRIPLICATE

SHORT-FORM REGISTRATION INFORMATION SHEET

SECTION A

The Department records list active short-form registration statements for the following persons of your organization filed on the date indicated by each name. If a person is not still functioning in the same capacity directly on behalf of the foreign principal, please show the date of termination.

Short Form List For Registrant: Nova Scotia Information Centre

Last Name	First Name and Other Names	Registration Date	Termination Date	Role
Thomas-Frye	Sadie	7/18/02	12/17/03	Supervisor/Manager

SECTION B

In addition to those persons listed in Section A, list below all current employees rendering services directly on behalf of the foreign principal(s) who have not as yet filed short-form registration statements. (Do not list clerks, secretaries, typists or employees in a similar or related capacity. If there is some question as to whether an employee has an obligation to file a short-form, please address a letter to us describing the activities and connection with the foreign principal.)

Name	Function	Date Hired

Signature: _____ Date: _____

Title: _____

Supplemental Statement
- Item 11

This office represented the Nova Scotia Department of Tourism and Culture at the following travel shows:

September 6	AAA Northern New York Consumer Travel Show Syracuse, NY Registration Fee - $75.00 Travel Costs - $740.75
October 27-28	Conway Tours Group Leader Travel Show Pawtucket, RI Registration Fee - $422.50 Travel Costs - $330.18

RECEIVED
2004 NOV 20 PM 4:27
OFFICE OF THE SECRETARY

November 13-18 National Tour Association Annual Convention
Charlotte, NC
Registration Fee - $ 1,005.00
Travel Cost - $1,414.50

The Nova Scotia Department of Tourism and Culture pays the registration fees for these travel shows. Staff attending these shows are reimbursed for their travel costs. These shows allow this office to promote Nova Scotia as a travel destination to the general public, travel agents, AAA counsellors and tour operators. Nova Scotia travel literature is distributed at these events and at the Information Centre in Portland. As mentioned, please find samples enclosed.

14(a)

The budget for the fiscal year of 2003/04 is stated below in Canadian funds. Please note it is the same as last year's budget.

Salaries & Benefits:	$106,500	
Travel:	2,400	
Supplies & Services:	20,070	(office expenses, postage, printing, stationarfreight, telecommunication, equipment repairs and maintenance contracts)
Other:	10,100	(memberships, dues, subscriptions and all other expenditures)
TOTAL	**$139,070**	

For the period of June 19, 2003 to December 18, 2003, the Nova Scotia Department of Finance reimbursed this office in the amount of $7,633.78 for purchases made directly from the operating account.

KeyBank
P.O. Box 22114
Albany, NY 12201-2114

Business Banking Statement
November 30, 2003

28028611

Justin report

Questions or comments?
Call our Key Business Resource Center
1-888-KEY4BIZ (1-888-539-4249)

3 B 0153 **00003** R EM B1
NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT
468 COMMERCIAL ST
PORTLAND ME 04101-4637

Enroll in Online Banking today at Key.com.
Access your available accounts, transfer funds and view your transactions right from your PC.

Key Business Checking 28028611
NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT

Beginning balance 10-31-03	$9,645.58
3 Subtractions	-136.61
Net fees and charges	-1.57
Ending balance 11-30-03	**$9,507.40**

Subtractions

Checks * *check missing from sequence*

5614	11-13	$45.70	5616	11-4	15.91
5615	11-4	75.00	**Total checks paid**		**$136.61**

Fees and charges

Date		*Quantity*	*Unit charge*	
11-28-03	Maintenance Service Charge	1	8.00	-$8.00
11-28-03	FDIC Charge	1	.08	-.08
11-28-03	Checks/Withdrawals Paid Charge	3	.18	-.54
11-28-03	Earnings Credit	1	7.05	+7.05
	Fees and charges assessed this period			**-$1.57**

Some or all of your monthly maintenance and service charges may be offset by an Earnings Credit Allowance that is calculated based on your investable balance. To determine the Earnings Credit Rate that was used to calculate your Earnings Credit Allowance for this statement cycle, please call the number listed on the summary page of your statement.

NOVA SCOTIA

justices

Statement of Petty Cash Expenditures

Document #		Reference Doc. #		Sample Doc. #	
Department **Tourism and Culture**			Division **Marketing**		
Cheque Payable to: (Name and Mailing address) **Key Bank of Maine Account #0028028611** **468 Commercial St, Portland, Maine 04101**			Vendor Account **10022641** Suppcode 50000087		Date November 2003
All Expenditures Must Be Supported By Receipts In Order Of Listing			PETTY CASH FUND:		
			Expenditures on this Statement		$ 138.18
			Cash on Hand		$ 9,507.40
			Approved Fund Level		$

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Order	Distribution Cost Center	GLAcct	Amount	
						Amount	**Tax**
10/30/03	AT & T Wireless/cell phone	5614		93700600	784100	$ 45.70	
10/31/03	Eastern carpet/cleaning of office carpet	5615		93700600	761200	$ 75.00	
10/31/03	Staples/file sorters for binders	5617		93700600	761300	$ 15.91	
10/31/03	bank charges			93700600	794100	$ 1.57	
				Total Expenditures		$ 138.18	

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date 12/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Order	Distribution Cost Centre	GL Acct	Amount
		784100	$45.70
		761200	$75.00
		761300	$15.91
		794100	$1.57
		Summary Total	$138.18

justice report

28028611

KeyNotes *(con't)*

Funds from deposits of local checks will be available on the first business day after the day of your deposit unless the routing number listed above is denoted with an asterisk (*). If the routing number is denoted with an asterisk (*), then the first $100 of your deposit will be available on the first business day after the day of your deposit, and the remaining funds will be available on the second business day after the day of deposit. The rest of the Funds Availability Policy remains unchanged.

Please retain this important information for your records. Complete copies of the revised Funds Availability Policy are available at any KeyBank branch.

Key Business Checking 28028611

NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT

Beginning balance 9-30-03	$9,043.73
2 Additions	+1,862.72
19 Subtractions	-1,255.40
Net fees and charges 1260.87	-5.47
Ending balance 10-31-03	**$9,645.58**

Additions

Deposits	Date	Serial #	Source		
	10-15		Customer Deposit	Petty cash reimbursements	$803.58
	10-27		Customer Deposit		1,059.14
			Total additions		**$1,862.72**

Subtractions

Checks ** check missing from sequence*

5595	10-2	$204.22	5602	10-15	8.00	5609	10-22	38.45
5596	10-3	34.30	5603	10-15	74.96	5610	10-27	142.04
5597	10-6	53.22	5604	10-9	30.60	5611	10-20	7.34
5598	10-1	75.00	5605	10-17	16.46	5612	10-24	48.00
5599	10-3	211.87	5606	10-20	208.33	5613	10-24	20.99
5600	10-1	12.05	5607	10-16	12.60	**Total checks paid**		**$1,255.40**
5601	10-15	28.86	5608	10-21	28.11			

Fees and charges

Date		Quantity	Unit charge	
10-31-03	Maintenance Service Charge	1	8.00	-$8.00
10-31-03	FDIC Charge	1	.08	-.08
10-31-03	Checks/Withdrawals Paid Charge	19	.18	-3.42
10-31-03	Charge For Deposits Made	2	.25	-.50

28028611

Fees and charges

Date		Quantity	Unit charge	
10-31-03	Foreign Deposited Items Charge	2	.09	-.18
10-31-03	Earnings Credit	1	6.71	+6.71
	Fees and charges assessed this period			**-$5.47**

Some or all of your monthly maintenance and service charges may be offset by an Earnings Credit Allowance that is calculated based on your investable balance. To determine the Earnings Credit Rate that was used to calculate your Earnings Credit Allowance for this statement cycle, please call the number listed on the summary page of your statement.

Justice Report

Statement of Petty Cash Expenditures

Document #		Reference Doc. #		Sample Doc. #	
Department	**Tourism and Culture**		Division	**Marketing**	
Cheque payable to: (Name and Mailing address)			Vendor Account		Date
Key Bank of Maine Account #0028028611 **468 Commercial St, Portland, Maine 04101**			**10022641**		October 2003
			Suppcode	50000087	
All Expenditures Must Be Supported By Receipts In Order Of Listing			PETTY CASH FUND:		
			Expenditures on this Statement		$ 1,261.27
			Cash on Hand		$ 9,645.58
			Approved Fund Level		$

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
7/03	error made with July statement					$ 0.40
9/29/03	Verizon/phone lines	5595		93700600	784100	$ 204.22
9/30/03	AT &T Wireless/cell phone	5596		93700600	784100	$ 34.30
9/30/03	DHL/courier to Halifax	5597		93700600	761600	$ 53.22
9/30/03	Golder & Associates/service on fax	5598		937006900	786100	$ 75.00
9/30/03	Scotia Prince Cruises/postage -Aug.	5599		93700600	761400	$ 141.87
	high speed internet connection	5599		93700600	784100	$ 70.00
9/29/03	Petty cash/paper,plastic cutlery	5600		93700600	761200	$ 12.05
10/03/03	Tara MacKay/bank reimbursement	5601		93700600	794100	$ 28.86
10/04/03	Tara MacKay/taxi reimbursement	5602		93700600	761200	$ 8.00
10/06/03	Staples/inkjet cartridges	5603		93700600	761200	$ 74.96
10/31/03	bank charges			93700600	794100	$ 5.47
					Total Expenditures	$ 708.35

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian [signature] Date 12/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Order	Distribution Cost Centre	GL Acct	Amount
	93700600	784100	$308.52
	93700600	794100	$34.33
	93700600	761600	$53.22
	93700600	786100	$75.00
	93700600	761400	$141.87
	93700600	761200	$95.01
		Summary Total	$707.95

NOVA SCOTIA

Statement of Petty Cash Expenditures P2.

Document #		Reference Doc. #		Sample Doc. #	
Department	**Tourism and Culture**		Division	**Marketing**	
Cheque Payable to: (Name and Mailing address)			Vendor Account		Date
Key Bank of Maine Account #0028028611 **468 Commercial St, Portland, Maine 04101**			**10022641**		October 2003
			Suppcode	50000087	
All Expenditures Must Be Supported By Receipts In Order Of Listing			PETTY CASH FUND:		
			Expenditures on this Statement		$ 1,260.87
			Cash on Hand		$ 9,645.58
			Approved Fund Level		$

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Order	Distribution Cost Center	GLAcct	Amount
12/07/03	Xpress Copy/copy service	5604		93700600	761700	$ 30.60
10/16/03	Warren's Office/copy paper	5605		93700600	761300	$ 16.46
10/15/03	Verizon/service for 2 lines	5606		93700600	784100	$ 208.33
10/15/03	Laura Sheppard/bank charges	5607		937006900	794100	$ 12.60
10/15/03	DHL/courier to Halifax	5608		93700600	761600	$ 28.11
10/16/03	New England Business Association/monthly dental	5609		93700600	817100	$ 38.45
10/15/03	Scotia Prince Cruises/Sept. Postage			93700600	761400	$ 72.04
	high speed internet connection			93700600	784100	$ 70.00
10/22/03	American Red Cross/CPR - Frye	5612		93700600	761200	$ 48.00
10/23/03	Borders/book - powerpoint	5613		93700600	761200	$ 20.99
10/15/03	Best Buy/disks	5611		93700600	761200	$ 7.34
				Total Expenditures		$ 552.92

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian Date 12/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Order	Distribution Cost Centre	GL Acct	Amount
	93700600	761700	$30.60
	93700600	761300	$16.46
	93700600	784100	$278.33
	93700600	794100	$12.60
	93700600	761600	$28.11
	93700600	761400	$72.04
	93700600	761200	$76.33
	93700600	817100	$38.45
		Summary Total	$552.92

NOVA SCOTIA

Statement of Petty Cash Expenditures P.1

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	

Cheque Payable to: (Name and Mailing address)	Vendor Account	Date
Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101	Suppcode 50000087	6/30/03

All Expenditures Must Be Supported By Receipts In Order Of Listing	PETTY CASH FUND:	
	Expenditures on this Statement	$ 2,966.95
	Cash on Hand	$ 6,095.81
	Approved Fund Level	

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
5/16	Sam's Club/membership	5537			817100	$ 30.00
5/24	R. Scott/Accommodation for L.Frotten	5540			535500	$ 75.00
5/30	Great Works Internet/2 mos.dialup	5542			784100	$ 21.79
6/03	Scotia Prince Cruises/April postage & high speed internet	5543			784100	$ 110.19
6/06	Grapheteria/laminate map	5544			761300	$ 19.49
6/02	Cathleen Allen/accommodations T. MacKay	5545			535500	$ 100.00
6/06	Verizon/2 mos. Phone line service	5546			784100	$ 400.01
6/09	DHL/courier BRC's	5547			761600	$ 128.52
6/09	New England Business/July dental	5548			817100	$ 128.45
				Total Expenditures		$ 1,013.45

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date _____

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Distribution Order	Cost Centre	GL Acct	Amount
		Summary Total	$0.00

NOVA SCOTIA

Statement of Petty Cash Expenditures P.2

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	

Cheque Payable to: (Name and Mailing address)	Vendor Account	Date
Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101	Suppcode 50000087	6/30/03

All Expenditures Must Be Supported By Receipts In Order Of Listing	PETTY CASH FUND:	
	Expenditures on this Statement	$
	Cash on Hand	$
	Approved Fund Level	

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
6/09	Best Western/3 nts T MacKay	5537			535500	$ 256.65
6/09	AT &T Wireless/cell phone	5550			784100	$ 53.80
6/11	Petty Cash/reimbursement for phone and cleaning supplies	5551			784100	$ 13.07
6/11	Scotia Prince Cruises/May postage and high speed internet	5552			761400 784100	$60.79 $70.00
6/11	Staples/stationary supplies & cable	5553			761200	$ 47.73
6/12	Grapheteria/lamination	5554			761300	$ 26.20
6/12	True Value/fire extinquisher,glue	5555			761200	$ 23.08
6/12	S. T. Frye/reimburse 2002 medical insurance premium	5556			798100	$ 706.96
6/12	Frye/reimburse Jan-Jun03 medical	5557			798100	$ 353.48
				Total Expenditures		$ 1,611.76

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date _____

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Distribution Order	Cost Centre	GL Acct	Amount
		Summary Total	$0.00

NOVA SCOTIA

Statement of Petty Cash Expenditures P.3

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	
Cheque Payable to: (Name and Mailing address) Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101			Vendor Account Suppcode 50000087		Date 6/30/03
All Expenditures Must Be Supported By Receipts In Order Of Listing			PETTY CASH FUND: Expenditures on this Statement Cash on Hand Approved Fund Level		

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
6/14	Petty Cash/ink cartridge	5558			762400	$ 34.58
6/19	The Signery/exterior signs	5559			761300	$ 150.15
6/23	Staples/ink supplies for printers and organizer 2003 and mailers	5560			762400 761200	89.40 60.63
6/30	Bank fee				794100	$ 6.98
				Total Expenditures		$ 341.74

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date _____

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Distribution Order	Cost Centre	GL Acct	Amount
		Summary Total	$0.00

295.80

Justice Report

NOVA SCOTIA

Statement of Petty Cash Expenditures

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	

Cheque Payable to: (Name and Mailing address)	Vendor Account	Date
Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101	Suppcode 50000087	July 31/03

All Expenditures Must Be Supported By Receipts In Order Of Listing	PETTY CASH FUND:	
	Expenditures on this Statement	$ 803.58
	Cash on Hand	$ 7,597.33
	Approved Fund Level	

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
7/31/03	bank charge				794100	$ 5.16
7/01/03	Shaws/Can. Day cake,supplies	5562			761200	$ 51.29
7/24/03	AT & T Wireless/cell phone	5563			784100	$ 68.54
7/24/03	American Red Cross/1st aid training	5564			814100	$ 58.00
7/24/03	New England Business/August plan	5565			817100	$ 38.45
7/24/03	Ptld. Press Herald/subscription	5566			818100	$ 49.95
7/24/03	Great Works Internet/modem	5567			784100	$ 9.95
7/24/03	Verizon/lines& long distance phone	5568			784100	$ 437.02
7/25/03	Staples/cartridge	5572			762400	$ 32.32
7/30/03	Petty Cash/first aid kit,supplies	5574			761200	$ 20.60
7/24/03	Staples/ink cartridge	5571			762400	$ 32.30
				Total Expenditures		$ 803.58

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date 8/25/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Order	Distribution Cost Centre	GL Acct	Amount

KeyBank
P.O. Box 22114
Albany, NY 12201-2114

28028611

Trustee report

10 B 0153 00010 R EM B1
NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT
468 COMMERCIAL ST
PORTLAND ME 04101-4637

Questions or comments?
Call our Key Business Resource Center
1-888-KEY4BIZ (1-888-539-4249)

Enroll in Online Banking today at Key.com.
Access your available accounts, transfer funds and view your transactions right from your PC.

KeyNotes

KeyBank offers an Account Analysis service which provides a method of pooling multiple business checking account balances to offset services fees and charges. To learn more about our Account Analysis service please call the Key Business Resource Center at 1-888-KEY4BIZ.

Key Business Checking 28028611

NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT

Beginning balance 6-30-03	$6,095.81
1 Addition	+2,804.11
10 Subtractions	-798.42
Net fees and charges	-5.16
Ending balance 7-31-03	**$8,096.34**

Additions

Deposits	*Date*	*Serial #*	*Source*	
	7-23		Customer Deposit	$2,804.11
			Total additions	**$2,804.11**

Subtractions

Checks * *check missing from sequence*

5562	7-8	$51.29	5566	7-28	49.95	5572	7-29	32.32
5563	7-31	68.54	5567	7-29	9.95	*5574	7-31	20.60
5564	7-30	58.00	5568	7-29	437.02	**Total checks paid**		**$798.42**
5565	7-29	38.45	5571	7-29	32.30			

#5569
ON HOLD
NOT MAILED YET

NOVA SCOTIA

Statement of Petty Cash Expenditures

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	

Cheque Payable to: (Name and Mailing address)	Vendor Account	Date
Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101	Suppcode 50000087	Aug. 31/03

All Expenditures Must Be Supported By Receipts In Order Of Listing	PETTY CASH FUND:	
	Expenditures on this Statement	$ 1,059.14
	Cash on Hand	$ 6,974.68
	Approved Fund Level	

6974.28

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
7/18/03	FARA/filing fee	5561			671200	$ 305.00
7/21/03	DHL/courier shipment to Halifax	5569			761600	$ 138.16
7/24/03	L. Sheppard/bank charges	5570			794100	$ 15.60
7/28/03	True Value/paint,brush for exterior display case	5573			671200	$ 39.85
8/6/03	Pet Quarters/pads to soak up water	5575			671200	$ 8.91
8/07/03	Petty cash/mop,wipes	5576			763700	$ 16.43
8/13/03	Warren's Office/bullentin board	5577			761200	$ 39.04
8/13/03	DHL/courier	5578			761600	$ 56.76
8/13/03	GWI/dial up internet	5579			784100	$ 9.95
8/2/03	Nynex/July-Aug phone lines	5580			784100	$ 200.30
8/20/03	M.A.D.D./listing in directory	5581			761200	$ 25.00
8/20/03	Office Max/display shelf	5582			763200	$ 112.31
8/22/03	L. Sheppard/ATM charges	5584			794100	$ 19.18
8/26/03	USPS/fee for shipping guides	5586			761400	$ 25.55
				Total Expenditures		$ 1,012.04

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian Sadie Frye Date 9/12/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Distribution Order	Cost Centre	GL Acct	Amount

NOVA SCOTIA

Statement of Petty Cash Expenditures

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	

Cheque Payable to: (Name and Mailing address)	Vendor Account	Date
Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101	Suppcode 50000087	August 31/03

All Expenditures Must Be Supported By Receipts In Order Of Listing	PETTY CASH FUND:	
	Expenditures on this Statement	$ 1,059.14
	Cash on Hand	$ 6,974.68
	Approved Fund Level	

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Distribution Order	Cost Center	GLAcct	Amount
8/26/03	Petty Cash/cleanser for employee washroom, film developing, paper plates and utencils	5587			761200	$ 23.95
8/27/03	Petty Cash/reimbursement for pizza for office staff and Scotia Prince warehouse staff , token of appreciation	5588			761200	$ 18.18
8/31/03	Bank charge				794100	$ 4.97
				Total Expenditures		$ 47.10

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date 9/2/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Distribution Order	Cost Centre	GL Acct	Amount
		Summary Total	$0.00

KeyBank
P.O. Box 22114
Albany, NY 12201-2114

2 copies

Business Banking Statement
August 31, 2003

28028611

16 B 0153 **00016** R EM B1
NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT
468 COMMERCIAL ST
PORTLAND ME 04101-4637

Questions or comments?
Call our Key Business Resource Center
1-888-KEY4BIZ (1-888-539-4249)

Enroll in Online Banking today at Key.com.
Access your available accounts, transfer funds and view your transactions right from your PC.

Key Business Checking 28028611
NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT

Beginning balance 7-31-03	$8,096.34
16 Subtractions	-1,054.17
Net fees and charges	-4.97
Ending balance 8-31-03 6,974.68	**$7,037.20**

7597.33
START

Subtractions

Checks * *check missing from sequence*

5583 $28.25
5585 34.27

5561	8-29	✓ $305.00	5577	8-14	✓ 39.04	*5584	8-26	✓ 19.18
*5569	8-27	✓ 138.16	5578	8-18	✓ 56.76	*5586	8-27	✓ 25.55
5570	8-5	✓ 15.60	5579	8-14	✓ 9.95	5587	8-27	✓ 23.95
*5573	8-1	✓ 39.85	5580	8-26	✓ 200.30	5588	8-27	✓ 18.18
*5575	8-8	✓ 8.91	5581	8-26	✓ 25.00	**Total checks paid**		**$1,054.17**
5576	8-8	✓ 16.43	5582	8-25	✓ 112.31			

Fees and charges

Date		Quantity	Unit charge	
8-29-03	Maintenance Service Charge	1	8.00	-$8.00
8-29-03	FDIC Charge	1	.07	-.07
8-29-03	Checks/Withdrawals Paid Charge	16	.18	-2.88
8-29-03	Earnings Credit	1	5.98	+5.98
	Fees and charges assessed this period			**-$4.97**

Some or all of your monthly maintenance and service charges may be offset by an Earnings Credit Allowance that is calculated based on your investable balance. To determine the Earnings Credit Rate that was used to calculate your Earnings Credit Allowance for this statement cycle, please call the number listed on the summary page of your statement.

6.92

KeyBank
P.O. Box 22114
Albany, NY 12201-2114

Business Banking Statement
September 30, 2003

28028611

8 B 0153 00008 R EM B1
NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT
468 COMMERCIAL ST
PORTLAND ME 04101-4637

Questions or comments?
Call our Key Business Resource Center
1-888-KEY4BIZ (1-888-539-4249)

Enroll in Online Banking today at Key.com.
Access your available accounts, transfer funds and view your transactions right from your PC.

Key Business Checking 28028611

NOVA SCOTIA INFORMATION CENTER
OPERATING ACCOUNT

Beginning balance 8-31-03		$7,037.20
1 Addition		+2,966.95
8 Subtractions		-956.46
Net fees and charges	794100	-3.96
Ending balance 9-30-03		**$9,043.73**

9043.33

Additions

Deposits	*Date*	*Serial #*	*Source*	
	9-15		Customer Deposit	$2,966.95
			Total additions	**$2,966.95**

Subtractions

Checks * *check missing from sequence*

5583	9-3	$28.25	5590	9-15	688.95		5593	9-10	47.56
*5585	9-2	34.27	5591	9-8	19.90		5594	9-25	2.63
*5589	9-9	58.00	5592	9-16	817100 76.90		**Total checks paid**		**-$956.46**

Fees and charges

Date		*Quantity*	*Unit charge*	
9-30-03	Maintenance Service Charge	1	8.00	-$8.00
9-30-03	FDIC Charge	1	.07	-.07
9-30-03	Checks/Withdrawals Paid Charge	8	.18	-1.44
9-30-03	Charge For Deposits Made	1	.25	-.25
9-30-03	Foreign Deposited Items Charge	1	.09	-.09
9-30-03	Earnings Credit	1	5.89	+5.89
	Fees and charges assessed this period			**-$3.96**

BALANCING YOUR ACCOUNT

Please examine your statement and canceled checks upon receipt. Erasures, alterations or irregularities should be reported promptly in accordance with your account agreement. The suggested steps below will help you balance your account.

INSTRUCTIONS

1. **Verify and check off in your check register** each deposit, check or other transaction shown on this statement.
2. **Enter into your check register and SUBTRACT:**
   - Checks or other deductions shown on your statement that you have *not* already entered.
   - The "Service charges", if any, shown on your statement.
3. **Enter into your check register and ADD:**
   - Deposits or other credits shown on your statement that you have *not* already entered.
   - The "Interest earned" shown on your statement, if any.

4 List from your check register any checks or other deductions that are *not* shown on your statement.

Check # or Date	Amount	

NOVA SCOTIA

Statement of Petty Cash Expenditures

Document #		Reference Doc. #		Sample Doc. #	
Department	Tourism & Culture		Division	Tourism	

Cheque Payable to: (Name and Mailing address)	Vendor Account	Date
Kay Bank of Maine C/O Sadie Thomas-Frye 468 Commercial Street, Portland, Maine 04101	10022641 Suppcode 50000087	9/30/03

All Expenditures Must Be Supported By Receipts In Order Of Listing	PETTY CASH FUND:	
	Expenditures on this Statement	$ 960.42
	Cash on Hand	$ 9,043.73
	Approved Fund Level	

DETAILS OF EXPENDITURES

Date	To Whom Paid And Item Description	Dept Use	Order	Distribution Cost Center	GLAcct	Amount
8/21/03	DHL/courier to Halifax	5583		93700600	7616	$ 28.25
8/25/03	At & T Wireless/cell phone	5585		93700600	7841	$ 34.27
9/04/03	American Red Cross/training	5589		93700600	7612	$ 58.00
9/04/03	Scotia Prince Cruises/June July post	5590		93700600	7614	$ 548.95
	SPC/June,July high speed internet	5590		93700600	7841	$ 140.00
9/04/03	Great Works Internet/dial up	5591		93700600	7841	$ 19.90
9/23/03	Petty Cash/reimburse for painting					
	supplies for office,	5593		93700600	7612	$ 47.56
9/23/03	Rite Aid/ream of paper	5594		93700600	761300	$ 2.63
9/30/03	Bank charges				794100	$ 3.96
9/04/03	New England Business Association					
	2 months dental	5592		93700600	817100	$ 76.90
				Total Expenditures		$ 960.42

Authorization and Approval

I certify that the above expenditures were incurred on Government Business

Custodian _____ Date 10/31/03

The above expenditures were authorized by me.

Signed _____ Date _____

Position _____ Date _____

Additions and extensions certified correct

Initialed _____ Date _____

Summary of Expenditure

Order	Distribution Cost Centre	GL Acct	Amount
		Summary Total	$0.00