

Request for Amendment Associated Entity Disclosure Return

FINANCIAL YEAR 2022-23

Completing the amended return:

- This request for amendment should be used to amend a 2022-23 *Associated Entity Disclosure Return* lodged with the AEC.
- This request for amendment is to be completed with reference to the [Financial Disclosure Guide for Associated Entities](#).
- Requests for amendment to a 2022-23 return will be available for public inspection from 1 February 2024 at www.aec.gov.au.
- Any supporting documentation included with this request for amendment may be treated as part of a public disclosure and displayed on the AEC website.
- The information on this request for amendment is collected under s 319A of the *Commonwealth Electoral Act 1918* (Electoral Act).
- For a definition of disclosure entity see [Disclosure entities and electoral activity](#).

Name of associated entity

Postal address

Suburb/town	State	Postcode
ABN	ACN:	

Financial controller details

Name of financial controller

Capacity or position

Postal address

Telephone number ()

Email address

Suburb/town	State	Postcode
()	Fax number ()	

List the political parties or disclosure entities the entity is associated with

Enquiries and returns should be addressed to:

Funding and Disclosure
Australian Electoral Commission
Locked Bag 4007
Canberra ACT 2601

Phone: 02 6271 4552
Email: fad@aec.gov.au

Office use only
Date received

2022-23 Return details

Is this the first amendment to the return? Yes No ►

How many other Requests for Amendment have been lodged?

Financial controller's certification

I certify that the information contained in this return and its attachments is true and complete to the best of my knowledge, information and belief.

I have made due and reasonable enquiries of the organisation on whose behalf I am authorised to complete this form. I understand that submitting a false or misleading return is an offence under Division 137.1 of the Criminal Code Act 1995.

OR

I certify that the information contained in this return and its attachments is true and complete to the best of my knowledge, information and belief, except for the particulars detailed in the 'Notice of Incomplete Return Form' (attached).

I have made due and reasonable inquiries of the organisation on whose behalf I am authorised to complete this form. I understand that submitting a false or misleading return or omitting any matter which makes the information misleading is an offence under Division 137.1 of the Criminal Code Act 1995.

Signature



Date

How to complete this form:

- If you are amending an existing entry, complete the 'Original Entry' item as it appeared on the original return and then write the amendment in full at the 'Amended Entry' item.
- If adding a completely new entry, write N/A in the 'Original Entry' item and complete the 'Amended Entry' item in full.
- Amounts should be reported on a GST inclusive basis.

Part 1a: Other business names

No change to previous information **OR**

Provide details of changes or amendments to the information previously provided.

Original Entry	Trading name
Amended Entry	Trading name

Part 1b: Related bodies corporate

No change to previous information **OR**

Provide details of changes or amendments to the information previously provided.

Original Entry	Name
	Postal address
	Suburb/town State Postcode
Amended Entry	Name
	Postal address
	Suburb/town State Postcode

Part 1c: Unions

No change to previous information **OR**

Provide details of changes or amendments to the information previously provided.

Original Entry	Name
	Postal address
	Suburb/town State Postcode
Amended Entry	Name
	Postal address
	Suburb/town State Postcode

If insufficient space, please attach additional sheets.

Part 2a: Total receipts for financial year 1 July 2022 to 30 June 2023

No change to previous information OR

Previous total receipts \$

Amended total receipts \$

Part 2b: Amount calculated to be value of gifts-in-kind

No change to previous information OR

Previous gifts-in-kind \$

Amended gifts-in-kind \$

Part 3: Amounts of more than \$15,200 received in financial year 1 July 2022 to 30 June 2023

No change to previous information OR

Provide details of changes or amendments to the information previously provided.

Received from		Amount received (GST inclusive)	Donation or Other Receipt*
Original Entry	Name	\$ <input type="text" value=""/>	
	Postal address		
	Suburb/Town State Postcode		
Amended Entry	Name	\$ <input type="text" value=""/>	
	Postal address		
	Suburb/Town State Postcode		
Original Entry	Name	\$ <input type="text" value=""/>	
	Postal address		
	Suburb/Town State Postcode		
Amended Entry	Name	\$ <input type="text" value=""/>	
	Postal address		
	Suburb/Town State Postcode		
Original Entry	Name	\$ <input type="text" value=""/>	
	Postal address		
	Suburb/Town State Postcode		
Amended Entry	Name	\$ <input type="text" value=""/>	
	Postal address		
	Suburb/Town State Postcode		

If insufficient space, please attach additional sheets.

* Please indicate whether this was a 'donation' or an 'other receipt'. The AEC contacts donors to ensure they are aware of their disclosure obligations and unnecessary contact with other persons is avoided if the nature of the receipt is shown.

Part 4: Total payments for financial year 1 July 2022 to 30 June 2023

No change to previous information OR

Previous total payments \$

Amended total payments \$

Part 5: Total debts as at 30 June 2023

No change to previous information OR

Previous total debts \$

Amended total debts \$

Part 6: Debts of more than \$15,200 as at 30 June 2023

No change to previous information OR

Provide details of changes or amendments to the information previously provided.

Creditor details			Amount owed (GST inclusive)	Financial or Non-financial institution
Original Entry	Name		\$	<input type="text" value="00"/>
	Street/postal			
	Suburb/Town	State Postcode		
Amended Entry	Name		\$	<input type="text" value="00"/>
	Street/postal			
	Suburb/Town	State Postcode		
Original Entry	Name		\$	<input type="text" value="00"/>
	Street/postal			
	Suburb/Town	State Postcode		
Amended Entry	Name		\$	<input type="text" value="00"/>
	Street/postal			
	Suburb/Town	State Postcode		
Original Entry	Name		\$	<input type="text" value="00"/>
	Street/postal			
	Suburb/Town	State Postcode		
Amended Entry	Name		\$	<input type="text" value="00"/>
	Street/postal			
	Suburb/Town	State Postcode		

If insufficient space, please attach additional sheets.

Part 7: Discretionary benefits

No change to previous information **OR**

Provide details of changes or amendments to the information previously provided.

Received from		Date of discretionary benefit	Value of discretionary benefit
Original Entry	Name		\$.00
Amended Entry	Name		\$.00
Original Entry	Name		\$.00
Amended Entry	Name		\$.00
Original Entry	Name		\$.00
Amended Entry	Name		\$.00
Original Entry	Name		\$.00
Amended Entry	Name		\$.00
Original Entry	Name		\$.00
Amended Entry	Name		\$.00
Original Entry	Name		\$.00
Amended Entry	Name		\$.00

If insufficient space, please attach additional sheets.

Part 8: Capital contributions

No change to previous information **OR**

Provide details of changes or amendments to the information previously provided.

Contributor details		Gross amount contributed (GST inclusive)
Original Entry	Name	\$.00
	Street/postal	
	Suburb/Town State Postcode	
Amended Entry	Name	\$.00
	Street/postal	
	Suburb/Town State Postcode	
Original Entry	Name	\$.00
	Street/postal	
	Suburb/Town State Postcode	
Amended Entry	Name	\$.00
	Street/postal	
	Suburb/Town State Postcode	
Original Entry	Name	\$.00
	Street/postal	
	Suburb/Town State Postcode	
Amended Entry	Name	\$.00
	Street/postal	
	Suburb/Town State Postcode	

If insufficient space, please attach additional sheets.