



STREET COLLECTIONS STATEMENT

Street Collections [Regulation] Act (1940)

DETAILS OF ORGANISATION

Name: _____

Address: _____

_____ Postcode: _____

Telephone No: _____ Email: _____

DATE OF APPEAL: _____

RECEIPTS

Gross Proceeds of Collections \$ _____

LESS EXPENSES

Advertising \$ _____

Printing/Stationery \$ _____

Other \$ _____

*Salaries \$ _____

Net Proceeds \$ _____

*No payment by way of reward/salary shall be paid to any collector participating in the Appeal unless the prior approval of the Minister has been obtained.

I CERTIFY THAT THE ABOVE MONIES WERE BANKED AND THE EXPENSES INCURRED ARE TRUE AND CORRECT.

SIGNATURE OF OFFICE HOLDER _____

This Statement must be returned within 30 days of the appeal.

Charitable Collections

Locked Bag 14
 CLOISTERS SQUARE WA 6850

Tel: 08 9282 4373
 Fax: 08 9282 4337

Email:
 charities@commerce.wa.gov.au

Country Callers: 1300 30 40 74

TTY: 08 9282 0900

Website:
 www.commerce.wa.gov.au/charities

Lodgement by Mail:

Department of Commerce
 Locked Bag 14
 Cloisters Square
 PERTH WA 6850