



Government of **Western Australia**
Department of **Mines, Industry Regulation and Safety**
Consumer Protection

Street Collections Statement

Please complete the following using a PEN. Write clearly using BLOCK LETTERS.
If you require assistance completing this form please contact the Associations & Charities
Branch on (08) 6552 9364.

Details of Organisation:

Name:

Postal Address:

Telephone:

Email:

Date of Appeal:

**ASSOCIATIONS &
CHARITIES BRANCH**

Postal Address:
Locked Bag 100
East Perth WA 6892

Telephone:
**(08) 6552 9364 or
1300 304 074**

Email:
charities@dmirs.wa.gov.au

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

Receipts:

Total Collections:

Expenses:

Advertising:

Printing/Stationary:

Other:

*Salaries

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

Net Proceeds:
(= Total Collections minus Expenses)

Declaration:

I certify that the above monies were banked and the expenses incurred are true and correct.

Signature: Date:

Name:

Position in Organisation:

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