



Voluntary cancellation of a charitable collections licence

Charitable Collections Act 1946

Purpose

This form should be used to voluntarily cancel an existing charitable collections licence.

This form is **not** to be used by organisations moving from one legal structure to another e.g. incorporated association to limited company. A **Change of circumstance form** is to be used to notify Consumer Protection of a change to a licence holder's corporate structure.

Instructions

- ▶ Type directly into this form electronically before printing and signing it or hand print neatly using an ink pen in block letters.
- ▶ Tick where appropriate and attach additional pages if space in this form is insufficient.

1. Name of charitable collections licence holder:

2. What is the organisation's licence number?

Issued under the *Charitable Collections Act 1946 (WA)*

CC

A. REASONS FOR VOLUNTARY CANCELLATION

Please complete the relevant section below.

A The organisation has wound up and is no longer receiving or soliciting charitable collections.

3. What date was the wind up of the organisation finalised?

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year

4. Is the organisation an incorporated association in Western Australia?

Yes No

5. If yes, has an Application for voluntary cancellation of an incorporated association been lodged with Consumer Protection WA?

Yes No

This application can be lodged using AssociationsOnline at www.dmirs.wa.gov.au/associationsonline.

B The organisation is no longer receiving or soliciting charitable collections in Western Australia.

6. When did the organisation stop receiving or soliciting donations in Western Australia?

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year

B. CONTACT DETAILS AND DECLARATION

7. Provide the name and particulars of the person submitting this form:

Title Mr Mrs Ms Miss Other ► _____

Name: Surname:

Position held:
e.g. CEO, CFO, Chairperson/President, Secretary, Treasurer etc

Telephone number: (landline or mobile) Email:

SIGNATORY AND DECLARANT

This form must be signed and declared by:

- a member of the Governing Body such as the Chairperson, President or Secretary;
- a person who holds a position in the charitable organisation who has been authorised by the Governing Body to sign this form (such as a CEO or CFO); or
- an agent instructed/authorised by the Governing Body of the charitable organisation to sign this form (such as a lawyer or an accountant).

If the signatory is different to the contact person, please complete the section below:

Name of person signing this form:

Position held:
e.g. trustee, director, chairperson/president, CEO

Telephone number: (landline or mobile) Email:

Authorisation and Declaration:

- I am authorised to lodge this information on behalf of the organisation.
- The information contained in this form and any supporting documents provided at the time or subsequent to lodgement are to the best of my knowledge and belief complete, correct and true.

Signature: Date:

LODGING THIS FORM

By email: charities@dmirs.wa.gov.au

If you need any assistance please contact the Associations and Charities Branch on **(08) 6552 9364**.

Please retain a copy of this form for your records.