

Request for Amendment Associated Entity Disclosure Return

FINANCIAL YEAR 2024-25

Completing the amended return:

- This request for amendment should be used to amend a 2024-25 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 2024-25 return will be available for public inspection from 2 February 2026 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 return is collected under s 314AEA of the Electoral Act, and in accordance with the *Privacy Act 1988*. To view the Privacy Notice for financial disclosure returns see the <u>Privacy</u> page on the AEC website.
- For a definition of disclosure entity see Disclosure entities and electoral activity.

Name of as	sociated entity						
Name	of financial controller						
2024-25 Ret	turn details						
Is this the	first amendmen to the return		No 🗌 🕨		How many other Ro Amendment have b		
Financial co	ntroller's certi	fication					
	•	e information coi wledge, informa		eturn and	its attachments is ti	rue and comple	ete to the
	I have made du complete this f	ue and reasonal	ole enquiries of t and that submittin		isation on whose be or misleading returr		
OR							
	best of my kno		tion and belief, e		its attachments is to the particulars deta		
	complete this f	orm. I understan	nd that submittin	g a false (sation on whose be or misleading returr nder Division 137.1	n or omitting an	y matter
Signature	L i					Date	
Enquiries ar should be a	nd returns ddressed to:	Austra Locke	ng and Disclosu alian Electoral C ed Bag 4007 erra ACT 2601		on	Phone: 02 62 Email: fad@	
Office use on	ly	Caribi	CHA AOT 2001				

Office use only Date received

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

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

• Amounts sn	louid be reported on a GST inclusive bas	SIS.	
art 1a: Other busi	ness names		
No change to previous	ous information OR		
Provide details o	f changes or amendments to the i	nformation previously prov	ided.
Original Entry	Trading name		
Amended Entry	Trading name		
art 1b: Related bo	dies cornorate		
No change to previous	. —		
		nformation proviously prov	idad
Original Entry	f changes or amendments to the i	mormation previously prov	idea.
Original Littly	Name		
	Postal address		
	Suburb/town	State	Postcode
Amended Entry	Name		
	Postal address		
	Suburb/town	State	Postcode
art 1c: Unions	_		
No change to previous	ous information OR		
Provide details o	f changes or amendments to the i	nformation previously prov	ided.
Original Entry	Name		
	Postal address		
	Suburb/town	State	Postcode
Amended Entry	Name		
	Postal address		

Postcode

State

If insufficient space, please attach additional sheets.

Suburb/town

Part 2a: Total receipts for financial year 1 July 2024 to 30 June 2025 No change to previous information OR *.*Ø6. Amended total receipts \$ ON **Previous total receipts** Part 2b: Amount calculated to be value of gifts-in-kind No change to previous information \$ ØÓ. Amended gifts-in-kind \$.00 Previous gifts-in-kind Part 3: Amounts of more than \$16,900 received in financial year 1 July 2024 to 30 June 2025 No change to previous information OR Provide details of changes or amendments to the information previously provided. Amount received Donation or Other Received from (GST inclusive) Receipt* \$.ØÓ Original Name **Entry** Postal address Suburb/Town State Postcode \$.ØÓ. Amended Name **Entry** Postal address Suburb/Town State Postcode \$.00 Original Name **Entry** Postal address Suburb/Town State Postcode \$.00 Amended Name **Entry** Postal address Suburb/Town State Postcode \$.ØÓ Original Name **Entry** Postal address Suburb/Town State Postcode ,0Ó \$ Amended Name **Entry** Postal address

If insufficient space, please attach additional sheets.

Suburb/Town

Postcode

State

^{*} 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 2024 to 30 June 2025 No change to previous information OR Previous total payments Amended total payments \$.00 Part 5: Total debts as at 30 June 2025 No change to previous information OR Previous total debts Amended total debts \$.00 Part 6: Debts of more than \$16,900 as at 30 June 2025 No change to previous information OR

No change to previous information OR Provide details of changes or amendments to the information previously provided.

		Creditor details			unt owed inclusive)	Financial or Non-financial institution
Original	Name				\$.00	
Entry	Street/postal					
	Suburb/Town		State	Postcode		
Amended	Name				\$.00	
Entry	Street/postal					
	Suburb/Town		State	Postcode		
Original	Name				\$.00	
Entry	Street/postal					
	Suburb/Town		State	Postcode		
Amended	Name				\$.00	
Entry	Street/postal					
	Suburb/Town		State	Postcode		
Original	Name				\$.00	
Entry	Street/postal					
	Suburb/Town		State	Postcode		
Amended	Name				\$.00	
Entry	Street/postal				,	
	Suburb/Town		State	Postcode		

If insufficient space, please attach additional sheets.

Part 7: Discretionary benefits

No ch	ange to	previous	information	OR
INO CI	ialige io	previous	IIIIOIIIIalioii	 J

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 ch	ange to	previous	information	OR
INO CI	ialige io	previous	IIIIOIIIIalioii	 J

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

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

If insufficient space, please attach additional sheets.