

Details of Organisation and Certification Statement (This page must be completed in full)

Organisation: _____ Incorporated: Yes/No

ABN: _____ (or a "Statement by Supplier" must be attached)

Postal Address: _____

President: _____

Telephone: After Hours: _____ Business Hours: _____

Secretary or Treasurer: _____

Telephone: After Hours: _____ Business Hours: _____

Email: _____

Affiliated Parent Body in Qld: _____

Number of Current Members: _____

Financial Reporting Category: (Please use the enclosed Fact Sheet to determine the Level of your association.)

Level	Anzac Day Trust Requirement	(Please Tick)
1	Audited Financial Statement & Auditors Certificate	
2	Financial statements verified by a person who can audit Level 1 Associations or by a person approved by the Chief Executive.	
3	Financial statements verified by the President or Treasurer of the association	

We, the undersigned, certify that information and figures in the following pages are correct to the best of our knowledge and belief.

SIGNED President: _____

Secretary or Treasurer: _____

Note: When completing the following application, items should be listed in the appropriate place and then identified on your financial statement, otherwise a written explanation should be given.

Space is provided on the last page of the application form for additional information or items not covered.

OFFICE USE ONLY	
Date Received	/ /
Date Acknowledged	/ /
Remarks	

WELFARE HOUSING PROJECTS

Item 1 - Building of homes/units for aged/infirm ex-service personnel

\$

(a) Name of home/units _____

(b) Address _____

(c) Number of residents _____

(d) Capital costs outlaid _____

Item 2 - Cost of maintaining homes/units

Item 3 - Cost of maintaining ex-service personnel in above homes/units

GROSS EXPENDITURE

Item 4 - Deduct any subsidies received or promised (give details)

\$ _____

Item 5 - Deduct contributions from residents (rent or maintenance levy)

\$ _____

TOTAL DEDUCTIONS _____

Net profit (DON'T CARRY FORWARD) _____

Net loss (TO BE CARRIED FORWARD) _____

Amount brought forward _____

WELFARE

Item 6 - Financial payments (non-repayable grants)

Item 7 - Home assistance (housekeeping, shopping etc)

Item 8 - Funeral expenses - donations towards members' funeral expenses

NOTE: Funeral notices and floral tributes are allowed. Payments made from mortuary funds are NOT ALLOWED

Item 9 - Legal and pension assistance (advocacy only)

Item 10 - Hospital expenses

(give name of hospital and nature of expenses e.g. visits or amenities)

Item 11 - Meals and assistance to needy or itinerant ex-service personnel (food, clothing etc.)

Item 12 - Other welfare outlays

- (a) Education _____
- (b) Gifts _____
- (c) Scholarships, bursaries _____
- (d) Wreaths _____
- (e) Commemorative Badges and/or poppies (donated - not for sale) _____

Carry forward _____

\$

Amount brought forward _____

ADMINISTRATIVE EXPENSES INCURRED

Item 13 - Financial expenses

- (a) Audit/Accountancy fees (% directly related to welfare administration ONLY)_____
- (b) Bad debts written off
- (c) Bank charges (% directly related to welfare administration).....
- (d) Insurance (state type-property, motor vehicle, public liability)
- (e) Lease charges (give details)
- (f) Legal fees (give details)
- (g) Permits, licenses, registrations (give type)

Item 14 - Committee and staff expenses

- (a) Conferences (less member contributions)
- (b) Honoraria (state for whom e.g. secretary, advocate)
- (c) Out of pocket expenses (give details).....
- (d) Superannuation (directly related to welfare administration).....
- (e) Travel expenses (less officer's contribution)
- (f) Wages/salaries (directly related to welfare administration).....

Item 15 - Office expenses

- (a) Computer expenses (directly related to welfare).....
- (b) Freight (not for saleable items)
- (c) Petty cash (give details)
- (d) Photocopying/printing
- (e) Postage
- (f) Stationery.....
- (g) Telephone

Item 16 - Media expenses

- (a) Advertising
 - (b) Newsletter/journal (less income from advertising)
 - (c) Subscriptions (give details)
- (newspapers, magazines, periodicals allowed) (capitations, affiliation/association fees are NOT ALLOWED)

Carry forward _____

Amount brought forward _____

Item 20 - Commemorative activities

Expenses for commemorative activities such as **Anzac Day/Remembrance Day** are allowed.
Construction/maintenance of war memorials/honour boards and the like are **NOT ALLOWED**.

- (a) Catering (less contributions received) _____
- (b) Donations (for assistance given at ceremonials e.g. Cadets, Bands etc)

- (c) Entertainment _____
- (d) Hire charges (give details) _____
- (e) Other Anzac Day expenses (give details)

- (f) Other Remembrance Day expenses (give details)

- (g) Other Commemorative Activities (give details)

SUB TOTAL: \$ _____

Item 21 – Grants received

Please list ALL grants from sources OTHER THAN the Anzac Day Trust, which your organisation has received during the period of this application. If the grant is related to items claimed on this application, the grant **MUST** be deducted.

Grant Source <small>(Eg. Dept of Veteran Affairs)</small>	Grant Amount	Details of Grant Expenditure <small>(Eg. Purchase of new computer)</small>	Deduct from application Y / N

TOTAL OF GRANTS TO BE DEDUCTED: \$ _____

GRAND TOTAL: \$ _____

ADDITIONAL INFORMATION (Add extra pages if necessary)
