

## ANNUAL RETURN BY A POLITICAL PARTY

Electoral Act 1907 section 175N

Party Details					
Name	AUSTRALIAN DEMOCRATS (WA)				
ı	In full - block letters				
Address (for correspondence)	PO BOX 123				
(ioi correspondence)	NORTHBRIDGE WA	- 1 x x x 1 = 1	Postcode 6865		
Daytime Telephone		Facsimile	91 -4 + 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Mobile Number		Email	treasurera wa democrats orgina		
Agent Details					
Name	ALEK TUBIAS GREEK				
	In full - block letters				
Address (for correspondence)	AS ABULIE				
Postcode					
Daytime Telephone		Facsimile			
Mobile Number	0413 564 286	Emai	atek, greer awa.democrats.org.au		
Declaration of Ager					
every particular, that no records required to be keep	other gifts of a kind require	ed to be disc the <i>Electora</i>	chments* is true, complete and accurate in closed were received and that the relevant of (Political Finance) Regulations 1996 have the control of the contro		
	A place in this State				
A Gren			12 /10/2005		
Sign	nature of agent	_	Date		
			1 July - 30 June		
* Attachments YES	/NO	_	Disclosure period of this return		

This return must be lodged with the Electoral Commissioner by 30 November, and will be made available for public inspection at the end of 4 weeks following that date. Returns and any queries should be directed to:

Policy Officer
Western Australian Electoral Commission
Level 2, 111 St Georges Terrace
PERTH WA 6000 or
GPO Box F316 PERTH WA 6841

Telephone: (08) 9214 0400 Fax: (08) 9226 0577

Email: waec@waec.wa.gov.au

## SUMMARY OF ALL GIFTS & OTHER INCOME RECEIVED FOR THE PERIOD

	Item	Number	Value or amount \$
1.	Gifts less than the Specified Amount (\$1,600)	159	89,551,25
2.	Gifts (including series of gifts) equal to or exceeding the Specified Amount (\$1,600) (show details below).	NIL	NIL
3.	Other income not listed above	20	699 A
Total of all amounts received			B951

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## GIFTS EQUAL TO OR EXCEEDING THE SPECIFIED AMOUNT (\$1,600)

Additional details required as per Electoral Act 1907 section 175M

Name	Address	Date of receipt	Total value or amount
	NIL KETURN		
	L'AL		
	NI		

Please attach extra sheets in the appropriate format if there is insufficient space.