

## ANNUAL DISCLOSURE OF GIFTS AND OTHER INCOME BY A POLITICAL PARTY

Electoral Act 1907 section 175N **Details of Party** Name of party COUNCIL ELECTORAL Address of party for 475 KOJONUP correspondence R.M.B. Postcode 6395 W.A. 0898311638 Facsimile Daytime Telephone 0898311038

D	etails of agent co	mpleting and	d lodgi	ng this return
Name of agent  JEAN HELEN ROBINSON.  In full - block letters				
Address of agent	R.M.B. 475	P0775 R	0,	KOJONUP.
		w.A.		Postcode 6395.
Daytime Telephone	08 98 31103	8 Fa	csimile	0898311638.

#### **DECLARATION OF AGENT**

I certify that the information contained in this return and its attachments \* is true, complete and accurate in every particular, that no other gifts of a kind required to be disclosed were received, and that the relevant records required to be kept under regulation 5(1) have been kept and will, if asked for, be made available for inspection at

KOTONUP. being a place in Western Australia

Signature of agent

\* Attachments: YES / NO

5 /10/ 98

Date

1 10/1/97 TO 30/6/98

> Disclosure period of this return (see below)

This return must be lodged by 30 November with the Electoral Commissioner, and will be made available for public inspection after the end of 4 weeks after that date at:

Western Australian Electoral Commission 4th Floor, 480 Hay Street PERTH WA 6000

#### **Disclosure Period**

All disclosure periods which would otherwise begin under the Act at an earlier date begin from 9 November 1996, the date on which the Electoral Legislation Amendment Act 1996 commenced and the Electoral (Political Finance) Regulations 1996 came into operation.

FOR OFFICE USE ONLY Date received

# SUMMARY OF ALL GIFTS RECEIVED FOR THE DISCLOSURE PERIOD

	Item		Value or amount	
1.	Donations (including series of donations) of \$1500 or more	None	NIL	
2.	Donations less than \$1500	HOHE	NIL	
3.	Fund-raising activities raising \$1500 or more *	HOHE	NIL	
4.	Other activities raising less than \$1500 **	NOHE	NIL	
5.	Contributions received from other sources not listed above	HOME	NIL	
	Sum total of all amounts received	Jon	NZL	

- \* Totals to include smaller activities held in conjunction with the main activity or event. Details to be given on page 5.
- \*\* Include only activities NOT associated with item 3.

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# **DONATIONS EQUAL TO OR EXCEEDING \$1500**

A. ***	Individual donors and unincorporated associa	tions		
Name of donor or unincorporated association	Donor's address (include names and addresses of unincorporated association committee members)	Date of donation	Receipt No.	Total value or amount
B.	Trust funds and foundations			
Name or title of trust fund or foundation	Names and addresses of trustees, executive members or directors and beneficiaries	Date of donation	Receipt No.	Total value or amount

## **EVENTS AND ACTIVITIES RAISING \$1500 OR MORE**

Date of event	Name and address of event	Name and address of the organiser	Other activities associated with the main event	Total Amoun
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### **RETURN FROM ASSETS**

Description of asset	Address or location of asset	Name and address of manager, trustee or executive	Date amount received	Receipt No.	Amount received
					Marie Ton

# PROCEEDS FROM SALE OF GOODS AND SERVICES

Description of goods or service	Purchaser's name	Address of purchaser	Date amount received	Receipt No.	Amount received