



PF 02

## **CANDIDATE FUNDING CLAIM**

	Electoral A	ict 1907, secti	on 176LD		
Election event date		6	SEPT 2	208	
Electoral expenditure amount claimed		1	9/76		
	Can	didate Deta	ills		
Name	ALEXANDER RO	どぞれず / Null – block letters	FULLHRTON		
Address	PO Box 180				
(for correspondence)	CARMIRKON	WA		Postcode	6701
Telephone	9941 1726	Mobile	0409 845 318 atu 90304@bigpond.net.au		
Facsimile		Email	atu 903041	a) bispono	(.net.au
	n agent to act on my behalf un			Act 1907 as sh	own below,
	Ag	ent Details			
Name	in f	ull – block letters	jednom Prasi krivitski men deljenih navondom siddilah krima ancisen oz osoborovo anci		
Address (for correspondence)					
		· .		Postcode	
Telephone		Mobile			<u> </u>
Facsimile		Email	agipinin midili dineta a menggunang seperantan <del>a menang antang antang antang antang an</del>		

Please pay entitlement \$1,299.03 EW8/12/08.

## Declaration of Agent or Candidate if No Agent

I certify that the information contained in this claim and its attachments\* is true, complete and accurate in every particular, and that the relevant records required to be kept under regulation 15 of the *Electoral (Political Finance) Regulations 1996* have been kept and will, if asked for, be made available for inspection at:

3 CROSSLAND ST CARMIRVON WA 6701
being a place in this State

19, 10, 08

Signature of agerst

Date

\* Important: This claim must be accompanied by an independently audited financial statement which certifies that the expenditure amount claimed is; in accordance with the definition of 'electoral expenditure' at section 175 of the Electoral Act 1907; in accordance with section 175LD of the Electoral Act 1907; and, supported by receipts and/or other documentation. This statement must be signed by a qualified member of a recognised accounting organisation. For more information please contact the officer listed on this form.

Preferred method of payment

Please direct my payment to the for

Bank/Financial Institution Name:

Branch:

Financial Institution Id: (BSB

Code)

**Account Number:** 

**Account Name:** 

This claim must be lodged within Western Australian Electoral Commissioner. Claims and any queries should be directed to:

Electoral Liaison Officer Western Australian Electoral Commission Level 2, 111 St Georges Terrace PERTH WA 6000 or GPO 8ox F316 PERTH WA 5841

Telephone (08) 9214 0400 Fax: (08) 9226 0577 Email: waec@waec.wa.gov.au

FOR OFFICE USE ONLY					
Date received	1/12/08	Date entered in EMSWA	4/12/68		
% first preference votes received	828	Election funding reimbursement amount (as calculated under section 176LC, <i>Electoral Act 1907</i> )	\$1,299.03.		
Amount pald	\$1,299.03	Date sent	11 /12 /08		