

WAEC
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## **CANDIDATE FUNDING CLAIM**

Electoral Act 1907, section 175LD

|   |                      | ,            |             |                          |
|---|----------------------|--------------|-------------|--------------------------|
| Election event date   |                      | 9 March 2013 |             |                          |
| Electoral expenditure amount claimed (less input tax credit that your are able to claim*)   |                      | \$43         | 101-36      |                          |
| Candidate Details   |                      |              |             |                          |
| Name  | Kevin Joseph Morgan. |              |             |                          |
| Candidate Agent Details or Candidate Details if No Agent  |                      |              |             |                          |
| Name Kevin Toseph Morgan.  In full - block letters  |                      |              |             |                          |
|   | HATO BOX 526         |              |             |                          |
| Address<br>(for correspondence)   | Cottes               |              |             | Postcode 6911            |
| Telephone   |                      |              | 04161       |                          |
| Facsimile   |                      | Email        | 18/morgen @ | 87065<br>Direct. net. au |
|   |                      |              |             |                          |
| 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:  |                      |              |             |                          |
|   | , (                  |              | ale         | <u> </u>                 |
|   |                      |              | 23 /        | 6/13                     |
| Signature of agent Date   |                      |              |             |                          |
| * "input tax credit" means an entitlement arising under section 11-20 or 15-15 of the A New Tax System (Goods and Services Tax) Act 1999 of the Commonwealth.   |                      |              |             |                          |
| 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 <i>Electoral Act 1907</i> ; in accordance with section 175LD of the <i>Electoral Act 1907</i> ; 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 the reverse of this form. |                      |              |             |                          |

Preferred method of payment to Please direct my payment to Bank/Financial Institution Na Branch:
Financial Institution Id: (BSE Account Number:
Account Name:

This claim must be lodged within 20 weeks after polling day in the relevant election with the 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 Box F316 PERTH WA 6841 Telephone: (08) 9214 0400 Fax: (08) 9226 0577 Email: waec@waec.wa.gov.au

FOR OFFICE USE ONLY **Public Funding Figure** 1.73303 2416 13 **Date Received Election funding** \$4,301.36 Number of first 2,482 reimbursement amount preference votes (as calculated under section received (EMSWA) 175LC, Electoral Act 1907) Amount paid (lesser amount % first preference 11.44 70 of Amount claimed and t4,084.50 votes received **Election funding** (EMSWA) reimbursement amount) 6 13 113 Yes / No **Date Paid** Eligible for Funding