

Elections ACT

Member of the Legislative Assembly annual return for the [insert year] financial year

This return covers the period:

to

1/7/[insert year] or the date
the MLA commenced as an
MLA

30/6/[insert year] or the
date the MLA ceased to be
an MLA

Please refer to the Funding and financial disclosure handbook, Members of the Legislative Assembly when completing this form.

The due date for lodging this return is [insert day and date]

Enquiries and returns should be addressed to:

Elections ACT, PO Box 272, Civic Square ACT 2608

O'Connell Centre, Cnr Stuart St & Blaxland Cres, Griffith, ACT 2603

Telephone: 6205 0224

Fax: 6205 0382

Email: elections@act.gov.au

Website: www.elections.act.gov.au

MLA details

Name of MLA:

Postal address:

Postcode:

I certify that the information contained in this return and its attachments is true and complete.

MLA's signature:

Reporting agent's details (Complete only if reporting agent is not the MLA)

Name of reporting agent:

Postal address:

Postcode:

I certify that the information contained in this return and its attachments is true and complete.

Agent's signature:

This form is Approved Form AF2008-48 under section 340A of the *Electoral Act 1992*

