



## Application for 2024 sub-branch funding

Name of sub-branch: \_\_\_\_\_

Name of contact: \_\_\_\_\_

Postal address: \_\_\_\_\_

Postcode:

Email: \_\_\_\_\_ Work phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

The contact has changed since previous application.

### Statement of income/expenditure for the period of January – December 2023

Bank statements or supporting account record attached. (required)\*

**\*NOTE: YOUR APPLICATION CAN NOT BE PROCESSED WITHOUT SUPPORT DOCUMENTATION.**

Income (list all sources)	\$	Expenditure (list all items)	\$
Opening balance at 1/1/2023	_____	_____	_____
2023 Structural funding received	_____	_____	_____
Donations received	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total income	_____	Total expenditure	_____
		Closing balance at 31/12/2023	_____
		<b>Current Balance at</b>	_____

We certify that the above information is true and correct.

We certify that all expenditure will be approved and minuted in meetings of the sub-branch.

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Name (print): \_\_\_\_\_ Name (print): \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_

### Payment details

#### SUB-BRANCH ACCOUNT DETAILS:

Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

BSB: \_\_\_\_\_ Account number: \_\_\_\_\_

Signatories to account: \_\_\_\_\_ Email: \_\_\_\_\_ Phone number: \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### Office use

Number EFT members: \_\_\_\_\_ Funding allocation: \_\_\_\_\_

**PLEASE RETURN THIS FORM WITH SUPPORT DOCUMENTATION BY EMAIL TO: [finance@aeuvic.asn.au](mailto:finance@aeuvic.asn.au)**