

Facsimile: (02) 6271 4555 email: fad@aec.gov.au

## **Change of Address of Party Agent**

Please refer to the Funding and Disclosure Handbook for Political Parties when completing this form. Giving false or misleading information is a serious offence.

Party Name (include State or Territory Branch if applicable)		
e de colle		
Agent Details		
Name		
New Address (This must not be a I	ost Office box)	
	Postcode	
New Postal Address		
	Postcode	
Telephone Number (BH)	Facsimile Number Email	
( )	( )	
Signature of Party Agent	———— Date	
	/ /	
Please provide an estimate of the	time taken to complete this form hrs mins	
Ficase provide an estimate of and	tille taken to complete this form	
This application should be	addressed to:	
FUNDING AND DISCLOSURE AUSTRALIAN ELECTORAL COMM	ISSION	
PO BOX 6172	OFFICE USE ONLY	
KINGSTON ACT 2604	Date Received by FAD:	
Telephone: (02) 6271 4552	Date Registered by FAD:	