

## Donation Request - Organisations

**ABN** 95399253048  
**Telephone** 1300 790 919  
**Postal** PO Box 2292 Yeppoon 4703  
**Enquiries** [www.livingstone.qld.gov.au/OnlineServices](http://www.livingstone.qld.gov.au/OnlineServices)



*Privacy Notice: Livingstone Shire Council is collecting the personal information you supply on this form for the purpose of processing your application. The Council is authorised to do this under section 369 of the Planning Act 2016 and the Building Act 1975. Your personal details will not be disclosed to any other person or agency external to Council without your consent unless required or authorised by law.*

### Organisation/Group Details

<b>Organisation Name</b>			
<b>Contact Person</b>		<b>Position</b>	
<b>Postal Address</b>			
<b>Phone</b>		<b>Mobile</b>	
<b>Email Address</b>			

**What is the primary purpose and main activities of the organisation?**

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### Financial Information

<b>Organisation's ABN</b>		
<b>Is your organisation/group registered for GST?</b>	Yes	No
<b>Is the organisation/group not-for-profit?</b>	Yes	No
<b>Did your organisation/group receive a Donation from Council last year?</b>	Yes - Amount received	No
<b>Amount requested</b>		

### Application Information

**What will you use this donation for? And how does this align with the Livingstone Community Plan – Towards 2050?**

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**Have you attempted to raise funds from other sources? Please describe.**

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**Signature**

<b>Name</b>	
<b>Signature</b>	
<b>Date</b>	