

## Statement of loans, grants and donations exceeding \$1,000 for financial year ending 30/06/2023

### Organisation details

<b>Name of organisation including division or branch</b>	Health Services Union Western Australia Branch
<b>Postal address</b>	P O Box 8204, Perth Business Centre, Perth WA
<b>Postcode</b>	6849

### Details of officer signing the statement

<b>Name</b>	Naomi McCrae
<b>Name of office held in organisation</b> (The person signing the statement must be an office-holder of the organisation)	Branch Secretary
<b>Postal address</b>	P O Box 8204, Perth Business Centre, Perth WA
<b>Postcode</b>	6849
<b>Telephone number (PH)</b>	(08) 9328 5155
<b>Facsimile number</b>	(08) 9328 9107
<b>Email</b>	union@hsuwa.com.au

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

<b>Signature</b>		<b>Date</b>	14 / 08 /2023
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**An organisation must lodge this statement within 90 days of the end of its financial year.**

## Loans, grants and donations exceeding \$1,000 made by organisation (if insufficient space, please attach separate sheet)

### Loans

Name of recipient of loan	Address	Amount	Purpose for which loan required	Security given in relation to loan	Arrangements for repayment of loan
Nil					

**Note:** where a loan is made to relieve a member or dependant of a member from severe financial hardship, the name and address and particulars of arrangements for repayment need not be stated.

### Grants

Name of recipient of grant	Address	Amount	Purpose of grant
Nil			

**Note:** where a grant is made to relieve a member or dependant of a member from severe financial hardship, the name and address need not be stated

### Donations

Name of recipient of donation	Address	Amount	Purpose of donation
Nil			

**Note:** where a donation is made to relieve a member or dependant of a member from severe financial hardship, the name and address need not be stated.