

COURT FUND APPLICATION

	Name of Agency/Organisation	
	Contact Name	
	Contact Number	
	Contact Email	
	Contact Address	
	Position held in Organisation	
	Organisation BSB & Account Number	
An d	E A BRIEF DESCRIPTION OF THE PURPOS organisation that provides a charitable or con eceive funds.	SE/AIM OF YOUR ORGANISATION mmunity service for the benefit of Victorian Citizens may be eligible
REC	SION / AREA SERVICED	
Age adn	-	COURT FUND MONEY r community service purposes. Funds are not to be used for mised quote for purchases the monies are sought for should be
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COURT FUND COMMITTEE USE ONLY

NAME OF ORGANISATION									
COURT									
COURT									
APPROVED FOR \$ AMOUNT									
PAYMENT SCHEDULE (circle a	ONGOING	/ ONE OF	F PAYMENT						
OR OR									
REJECTED ON THE FOLLOWING GROUNDS									
SIGNED BY COMMITTEE:									
NAME 1:	NAME 2:			NAME 3:					

DATE:

PLEASE FORWARD COMPLETED FORM TO COURT FUND ADMINISTRATOR FOR PROCESSING

DATE:

courtfund@courts.vic.gov.au

PLEASE PRINT NAME AND DATE UNDER SIGNATURE

OR

DATE:

Court Fund Administrator 11/181 William Street Melbourne, VIC 3000