

## **Audit Certificate**

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Miss

Ms

Mrs

Dr

Mr 🗶

**Auditor Number** 

Surname

OWENS

Given Name(s)

Address

Street

726 ANZA - HIGHWAY

Suburb

State

Postcode 5 0 4 5

## Return details

Lodging entity

Type of return

Return period

PAULINE HANSON'S ONE NATION PARTY

CAPPED EXPENDITURE PERIOD RETURN

01/07/1021 - 18/04/2022 STATE ELECTION

## Declaration & Acknowledgement

## I declare that:

- the return or claim.
- certificate, subject to the follow g qualifications:

I am a registered company audi r under the Corporations Act 2001.

I was given full and free access tall reasonable times to the accounts and documents of the agent responsible for giving the return or claim and of the relevant entity, candidate or group relating directly or indirectly to a matter required to be disclosed in

I have examined the accounts a documents referred to in the previous paragraph that I considered material for giving the

I have received all the informatic and explanations I have asked for in relation to any matter required to be stated in the

Not

- Within the last 10 years, I have to t been a member of a registered political party.
- I have no reason to think any steement in the declaration is not correct.

If, in carrying out an audit to pregare this certificate, I have become aware of a matter that is reasonably likely to constitute a

contravention of Part 13A by a revent entity, candidate or group, I must, within 7 days after becoming aware of the matter, give the Electoral Commissioner writ an notice of the matter (section 130ZW).

Knowingly providing false or mi eading information in a material particular is an offence (section 130ZZE(3)).

Signature

Date

25/05/2020

**Enquiries and lodgement to:** 

Funding, Disclosure and Registration 3ranch Electoral Commission South Australi

GPO BOX 646 Adelaide SA 5001

Telephone: Fax: Email:

08 7424 7400 08 7424 7444 ecsa.fad@sa.gov.au