

Audit Certificate

Auditor details									
Miss	Ms	Mrs	Mr X	Dr		Auditor Numbe	er 310046		
Surname	e				Given Name(s)				
GOSN	GOSNOLD								
Address									
Street	eet C/- BDO Level 7, 420 King William Street								
Suburb	Adelaide				State	SA	Postcode 5	0 0	0

Return details	
Lodging entity	Ambulance Employees Association of South Australia
Type of return	Third Party Return
Return period	19 April to 30 June 2022

Declaration & Acknowledgement

I declare that:

- I am a registered company auditor under the Corporations Act 2001.
- I was given full and free access at all 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
 the return or claim.
- I have examined the accounts and documents referred to in the previous paragraph that I considered material for giving the certificate;
- I have received all the information and explanations I have asked for in relation to any matter required to be stated in the certificate, subject to the following qualifications:
- Within the last 10 years, I have not been a member of a registered political party.
- I have no reason to think any statement in the declaration is not correct.

I acknowledge that:

- If, in carrying out an audit to prepare this certificate, I have become aware of a matter that is reasonably likely to constitute a
 contravention of Part 13A by a relevant entity, candidate or group, I must, within 7 days after becoming aware of the matter, give
 the Electoral Commissioner written notice of the matter (section 130ZW).
- Knowingly providing false or misleading information in a material particular is an offence (section 130ZZE(3)).

Signature



Date 25 July 2022

Enquiries and lodgement to: Funding, Disclosure and Registration Branch Electoral Commission South Australia GPO BOX 646 Adelaide SA 5001

Telephone: Fax: Email: 08 7424 7400 08 7424 7444 ecsa.fad@sa.gov.au