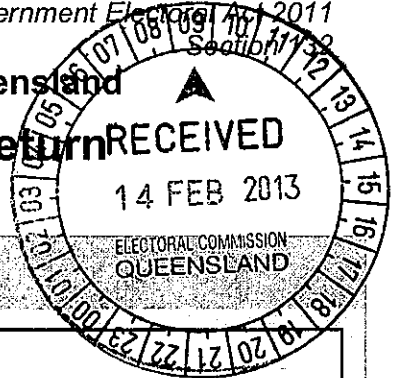




Electoral Commission of Queensland

Request to Amend a Return



SECTION 1: Details of Person Requesting Amendment

Name

CHERYL ANN LEACH

Position (e.g Agent, Candidate)

CANDIDATE

Business or Residential Address

PO BOX 867 WARWICK QLD

Contact

Phone 0400 011 260 Email rosebankfarms@bigpond.com

SECTION 2: Request made relating to return (please tick):

- Group of Candidates / Candidate
- Third Party / Donor

Name of Candidate: CHERYL ANN LEACH

SECTION 3: Election:

Name of Election: LOCAL GOVERNMENT ELECTION

SECTION 4: Amendments to be made are (please tick):

- attached
- attached in a new return
- detailed in the space provided

Insert details of amendments to be made (if applicable)

NOTE: If you incorrectly lodged a QFD09 form for the Local Government Elections, please tick "attached in a new return" and provide the Commission with a completed QLG01.

SECTION 5: Signature and date

Signature

*[Handwritten Signature]*

Date

8/2/13

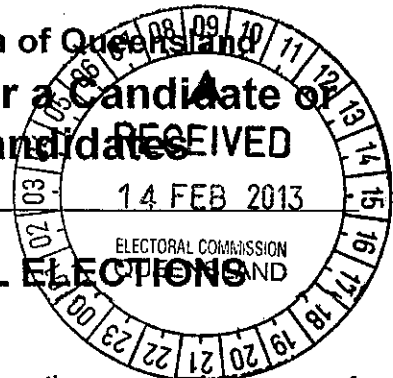


ELECTORAL COMMISSION  
QUEENSLAND

12 OCT 2012

Local Government Electoral Act 2011  
s116-122

Electoral Commission of Queensland  
**Disclosure Return for a Candidate or  
a Group of Candidates**



**LOCAL GOVERNMENT QUADRENNIAL ELECTIONS  
28 APRIL 2012**

The *Local Government Electoral Act 2011* requires a candidate or the agent of a group of candidates to give the Electoral Commission of Queensland a return in the approved form stating -

- the total amount of gifts received by, or for, the candidate/s during the relevant disclosure period, together with the required details; and
- the total amount of loans received by the candidate/s during the relevant disclosure period, together with the required details.

Returns must be lodged within 15 weeks after the conclusion of the election by **13 August 2012**.

A Glossary of key terms is enclosed at the end of this form.

**Statement of Returns**

The *Local Government Electoral Act 2011* requires the agent, or if no agent is appointed, the candidate to certify that the return submitted to the Commission is complete and true. For incomplete returns a further statement stating the nature, type and reasons of the exclusions must accompany this return.

**Inquiries**

All inquiries should be directed to the Commission's Funding and Disclosure Unit at Level 6 Forestry House, 160 Mary Street, Brisbane or by telephone to 1300 881 665.

**Lodgement**

Hardcopy original forms are to be lodged with the Electoral Commission of Queensland.

By hand ..... Level 6 160 Mary Street  
BRISBANE QLD 4000

Facsimile ..... (07) 3036 4999

By post..... GPO Box 1393

Email ..... [fad@ecq.qld.gov.au](mailto:fad@ecq.qld.gov.au)

**Candidate Details**

Name of Candidate or  
Name of Group

Cheryl Ann Leach

Name of Agent  
(where appointed)

Failure to show your council will delay refund of your nomination deposit.

Local Government for  
which nominated

Southern Downs Regional Council

ECQ office use only

Received 18/10/2012 Reg No C/1268-12 Scanned \_\_\_\_\_ Posted \_\_\_\_\_

14/2/2013

List the full names of all candidates in the group:


### Disclosure Period

For a group of candidates (please select):

- The disclosure period commences on 15 April 2008 and concludes on 28 May 2012.

For individual candidates (please select):

Disclosure Period Commencement 13/12 Conclusion: 28 May 2012

- I am a candidate, who at the time of nomination for the election, was a councillor of a local government. The disclosure period commences on the day of election or appointment to councillor and concludes on 28 May 2012; or
- I was a candidate in the previous local government quadrennial election held on 15 March 2008. The disclosure period commences on 14 April 2008 and concludes on 28 May 2012; or
- I did not contest the previous local government quadrennial election and do not hold a position of councillor of a local government. The disclosure period commences on the earlier of announcement of candidacy or nomination as a candidate in the election and concludes on 28 May 2012.

### Return Summary

Total amount of **GIFTS** received during the applicable disclosure period

\$ 0

Number of persons who made gifts

Total amount of **LOANS** received during the applicable disclosure period

\$ 0

Number of persons who made loans

For a group of candidates, these totals must include ALL sums received by ALL candidates.

Additional pages can be supplied upon request. Alternately, you may choose to substitute a Schedule using the same format.



## Statement

Name of Candidate,  
or the Agent of a  
Group

Cheryl Ann Leach

Postal Address

PO Box 867 Warwick Qld

4 3 7 0

Telephone

Facsimile

Email

rosebankfarm8@bigpond.com

I certify that the information contained in this return and any attachments is true and complete; OR

This return is incomplete, and I state the following:

The nature and type of the particulars which are unable to be obtained:

Why these particulars have not been obtained:

Is another person able to provide these details? If so, please provide their contact details:

Signature

Cheryl Leach

Digitally signed by Cheryl Leach  
DN: cn=Cheryl Leach, o=Cheryl Leach, ou=Cheryl Leach, email=rosebankfarm8@bigpond.com, c=AU  
Date: 2012.08.12 16:03:49 +1000



Date

6 August 2012