

Goolawah Cooperative Limited Work Claim Form

At the General Meeting on 4 April 2015 the following resolution was passed: "Work Claims to be applied at an hourly rate of \$10 regardless of whether applied to the Work Levy or Annual Levy commencing 1 July". This makes it possible to use a much simpler claim work claim form.

This form contains fillable form fields to make it easy to correctly and legibly complete and send for validation. Please (1) save it on your computer, (2) open it with free Adobe Reader or Nitro Reader, (3) fill in the details, (4) Save the changed form with a new name, (5) email it to gool.treas@gmail.com

Alternatively you can print it and complete it manually. If you choose this option please write legibly!

Follow these links to download the latest version of Adobe Reader or Nitro Reader

Share Name		Share Nos:		Hourly Rate	1000
Claim Date:					عام ماط
Date Worked	Description of work.	Category	Hours (Decimal)	Value	todado
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Validation by treasurer						
# of	Annual Max \$	Prev. Claims	Forward from	Available	Validated for	Date
shares held	WL and AL	This Year	Prev. Years	to claim	this Claim	Validated

Approved at meeting (date):

- Only work on the Goolawah approved jobs list is eligible to be claimed.
- Only work performed in the 3 months preceding the claim is eligible to be claimed.
- Claims will only be accepted if submitted on this form.
- Claims must be validated by the treasurer BEFORE being submitted to a meeting for community approval.
- Claims that don't meet accepted guidelines may be rejected and returned to the originator for revision.
- The maximum you can claim in any one year is the Work Levy and Annual Levy for each share you own (miximum 3 shares) (WL \$180.00 plus AL \$500.00 = \$680.00)
- Work claims cannot be applied to future years' levies.
- Levies must be claimed within 3 months of the work being done.

Form version: 20161124



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Share Name		Share Nos:		Hourly Rate
Claim Date:				
Date Worked	Description of work.	Category	Hours (Decimal)	Value
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	Please use a separate sheet if	necessary. Add total here >		
		TOTAL CLAIMED		

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# of	Annual Max \$	Prev. Claims	Forward from	Available	Validated for	Date
shares held	WL and AL	This Year	Prev. Years	to claim	this Claim	Validated

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Goolawah Cooperative Limited Work Claim Form 2016/17

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Share Name	TRIN	H NGU	1EN	Share Nos:	#36	Hourly Rate
Claim Date:	29 (OCT 20	20			10.00
Date Worked	Description of wor	k.		Category	Hours (Decimal)	Value
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5.10.20	OCT A	am Min	IUTES	C 3	2.0	20.00
29.10.20	MEMBE	RSHIP BUS	SINESS	C1	1-0	10.00
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				TOTAL CLAIMED		\$50.00
Notes/comment	s	1 2 7				
# of	Annual Max S	Prev. Claims	lidation by treasure Forward from	er Available	Validated for	Date
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Committee of the Commit	005 1	000	The second second second	FOF I	F0 2	1/10/201
1	805 l	220		585	50 3	1/10/20

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