

All Communication address to the General Manager

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DX 26402 Shellharbour City Centre

## **Council Meeting - Request for Electronic Recording**

	( <u>please pr</u>	<u>rint</u> )	
ADDRESS OF APPLICANT	Γ: House No Street I	Name	
Suburb Post Code			
Phone No	Email Addre	9SS	
acknowledge that Electro	nic Recordings will be ava	ailable 5 working days after the date of	f the relevan
Council Meeting and reque	st Council to: hold for o	collection or post to address (please tick one box)	s above
Select appropriate box below			Cost
I wish to purchase an electronic copy of all Ordinary and Extraordinary Council     Meetings for the current financial year			\$227.00 inc GST per annum
I wish to purchase an electronic copy of Council Meeting held on []      (insert meeting date)			\$24.00 inc GST per meeting
Signature of Applicant		Date	
	OFFICE USE ONL		
Date			
		Fee	
Receipt No			
		Cashiers Code: 014	

Last updated: March 2017