

Have you provided?	
Your bank a/c details	<input type="checkbox"/>
Invoices/receipts	<input type="checkbox"/>



## CWA of NSW Drought Aid Funds - September 2018

*The information provided will remain confidential. Only statistical summaries may be released.*

Assistance to help meet **household** expenses for drought affected families, **up to a maximum of \$3,000** per family/household, is available to eligible applicants. Expenses can include grocery bills, vehicle maintenance, school, electricity, rate instalments, telephone, dental and medical (gap payments or cost of travel to access treatment) etc. for current expenses - **paid & unpaid**.

**Please return completed form and attachments to:** info@cwaofnsw.org.au, or fax: 02 8338 1595, or send to Chief Executive Officer, CWA of NSW, PO Box 222, Mascot NSW 1460.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you in a "drought" classified area? *(according to the NSW DPI Combined Drought Indicator)*

\_\_\_\_\_

What is your primary source of income? \_\_\_\_\_

\_\_\_\_\_

Briefly describe how the drought has impacted on your primary source of income and your circumstances: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total amount sought: \_\_\_\_\_

You must provide your bank account details as payments will be transferred directly to your bank account. You must also provide invoices and/or receipts (keep copies for your records).

Funds sought for/or name of Service Provider (Biller)	Due Date	Amount

Name of Bank Account Holder: \_\_\_\_\_

BSB: \_\_\_\_\_ Account No: \_\_\_\_\_ **Please write numbers clearly**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Applicants who have received a payment below the \$3,000 threshold per household are able to submit additional expenses via email to drought@cwaofnsw.org.au referencing their application number.*