



7 Brockman St
GINGIN WA 6503
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BOND – PUBLIC ADDRESS SYSTEM

Date Hired:

Name of Hirer:

Address of Hirer:
.....

Contact No:

Type of Function:
.....

Bond Payable: \$200.00

Bond Paid: \$..... Date Paid Receipt No:

Date Public Address System Checked:

Checked by:

Bond to be refunded:(signature)