

Business and industry portal

Office of Fair Trading

Department of Justice and Attorney-General

ABN: 13 846 673 994

Official receipt

QUANTS AND QUILLS INCORPORATED
4F / 182 Dornoch Terrace
Highgate Hill, QLD, 4101

Tax invoice

Desc	ription	Amount	GST	Amount (incl. GST)
Incorporated association application	fee	\$148.00	\$0.00	\$148.00
		Total amount \$148.00	Total GST \$0.00	Total paid \$148.00
Receipt date and time (AEST)	Receipt number	Custom	ner reference nur	mber (CRN)
09 Sep 2016 4:32:55 PM	66811364927	11011	3803325388	

Call 13 QGOV (13 74 68) for business enquiries

Getting started

Purpose of this form

This SmartForm can be used to lodge an:

· Application for incorporation of an association

Privacy statement

The Office of Fair Trading (OFT) is collecting information, including personal information, on this form for the purposes of the *Associations Incorporation Act* 1981 and Associations Incorporation Regulation 1999. In accordance with this legislation, a register of this information and any documents required by the department are available for inspection by the public upon payment of a prescribed fee. Where authorised or required by law, information on this form can be disclosed without your consent.

Important information

In order to become incorporated, your association must:

- · have at least seven members
- · be a not for profit association
- · have a physical address in Queensland.

Before starting this form, your association must:

- · hold a general meeting and pass resolutions to incorporate, adopt proposed rules and appoint a person to make the application to incorporate
- · choose a name
- · adopt a set of rules
- · elect a management committee.

To complete this form you will need:

- · the name, address and contact details of the association's president, treasurer and, if applicable, secretary
- · a copy of the association's rules if the model rules are not being adopted
- · a copy of the association's objects if the model rules are being adopted
- · any information about land that is owned or leased by the association
- · a letter of agreement from the parent association if the association is a branch of another association

More information on setting up an incorporated association is available on the OFT website.

You are able to save and close this form at any stage before submitting the form using the Save for Later button. You will be given a secure tracking code that allows you access to the saved form for 72 hours. After this time, the information will be deleted and you will need to start a new form. Please note: until you have submitted this form, the form is not considered received.

You can also cancel out of this form at any time.

If an attachment is required and an electronic file is not available, you will be sent an email containing detailed information relating to documents or information that you need to provide to the OFT before your application can be finalised, contact information for the OFT, a tax invoice (if applicable) and details of the form you submitted.

This information must be supplied to the OFT within 28 days. Failure to submit these documents within this timeframe may result in the application being withdrawn. If you are unable to provide the documents within 28 days, it is important that you contact the OFT to seek an extension for their lodgement.

If you would like the tax invoice (receipt), a copy of the form and any other information automatically emailed to you, an email address must be entered in this form. Alternatively, you can download and save these documents when you submit the form.

Please note: an OFT officer may contact you seeking additional information about the submitted form. Please allow 4 weeks from date of submission for the application to be processed. Processing times may vary depending on volume of forms on hand and seasonal fluctuations.

Payment options and refunds

Pay online

You can choose to pay online using a VISA or MasterCard credit/debit card. No other cards can be accepted. On submission of this form you will be redirected to a secure payment portal hosted by the Commonwealth Bank of Australia.





Pay later

You can choose to pay later using a number of methods including BPAY®. Details will be provided on lodgement of this form of how you can make a BPAY® payment from your cheque, savings or transaction account. If paying by this option, payment should be made as soon as lodgement of this form is complete.



For other payment options visit the OFT website.

If you choose to withdraw this application for incorporation prior to it being issued, part of the application fee may be refunded.

Declaration

Have you been appointed, by way of resolution of members, to complete this application for the association to be incorporated under the *Associations Incorporation Act 1981?* *





I declare that: *

As the appointed person of the association submitting this application, I have read and understood the above information. I understand that any payment or attachments that are required to finalise this application for incorporation of association must be supplied **within 28 days** of submission. I understand that if I do not supply these documents within the specified timeframe, the application may be withdrawn.

Details of appointed person

Name				
First name *		Surname *		
Simon		Elvery		
Position in management committee	е			
Are you the secretary of the association?	*			
Yes		○No		
Are you the President or Treasurer of the	association? *			
President	Treasurer	○No		
Residential address				
Enter your street address (PO Boxes ar Queensland border.	e not acceptable). As the secre	etary, you must be a resident of Queenslar	nd or be living within	65kms of the
Residential address of appointed person *	•			
4F / 182 Dornoch Terrace				
Suburb *			State *	Postcode *
Highgate Hill			QLD	4101
ls your postal address different to your res	sidential address? *			
Yes		No		
Any correspondence regarding this applica	ation will be sent to your residenti	ial address entered above.		
Contact details				
You must provide either your mobile or da	aytime phone number. *			
Mobile phone number		Daytime contact number		
04 0815 5856				
Alternate contact number		Fax number		
If you would like a copy of the form and an	ny other information automaticall	y emailed to you, an email address must be	provided.	
By choosing yes below, you consent to the	e use of this email address by the	e OFT for any or all correspondence relating t	to your application. *	
Yes		No		
Email *				
simon@elvery.net				

Confirm email (for security reasons, please re-type your email address as you cannot copy and paste)

simon@elvery.net

Organisation details

Is the association a branch of another association?

Proposed name

A number of other restrictions may apply to the name you give the association.

The association must choose to include either 'Inc' or 'Incorporated' to be part of the name and will be given the first available name. All name preferences must be entered in UPPER CASE. Proposed name 1st preference * QUANTS AND QUILLS INCORPORATED * OINC * Proposed name 2nd preference QUEENSLAND TECHNOLOGICAL STORYTELLERS ○INCORPORATED INC Proposed name 3rd preference ○ INCORPORATED OINC **Current unincorporated association details** Name of unincorporated association * Hacks/Hackers Brisbane Approximately when was the association formed? * October 2012 Does the association have less than 7 members? * No Number of members currently in association * 8 Does the association provide a financial gain to its members? No Is the association already incorporated under the Industrial Relations Act 1999? No Is the association a parents and citizens association under the Education (General Provisions) Act 2006? No

No

Does the association own or lease land or hold	an interest in land, or is it a trustee of trust land under the Land Act 1994?	
Yes	No	
Resolution passed		
The members of the unincorporated association resolution with a three quarters majority deciding	n, Hacks/Hackers Brisbane, held a general meeting at the address below, on the date specified, an ${f g}$ to:	d passed a
incorporate under the Actadopt the proposed rules (included with	this application)	
A second resolution was passed to appoint a pe	erson to make the application.	
Date resolution passed e.g 01/01/2013 *		
28/08/2016		
Address or location where resolution was passe	ed *	
133 Grey St, South Brisbane QLD 4101		
Financial institution		
Does the unincorporated association have an ex	xisting bank account? *	
Yes	No	
Proposed bank account details		
Bank/financial institution name *		
Commonwealth Bank of Australia		
Branch name *		
South Bank		
Association addresses		
Please enter the association's nominated addre address. PO Box or interstate addresses are no	ss for service of documents. NOTE: the nominated address for service of documents must be a Q t accepted. *	ueensland
4F / 182 Dornoch Terrace		
Suburb *	State *	Postcode *
Highgate Hill	QLD	4101
Is the association's postal address the same as	the nominated address for service of documents? *	
Yes	○No	

Are the association's books, documents, instruments of title and securities stor	ed at the nominated address for service of documents? *
NOTE: the address where the association's books are stored must be a Queer	sland address. PO Box or interstate addresses are not accepted
Yes	○No
Does the association have an ABN?	
Yes	● No

Office bearers

Treasurer			
First name *	Surname *		
Daniel	Angus		
Enter your street address (PO Boxes are not acceptable).			
Residential address *			
70 Geelong Street			
Suburb *		State *	Postcode *
East Brisbane		QLD	4169

Association rules

Associations can choose to adopt either the model rules or their own rules.

The model rules are a standard set of rules that only allow you to change certain details, such as the association's name. All other parts of the rules must remain unchanged. You will be prompted to enter these details after you select model rules below.

If the association does not want to use the model rules, it can adopt its own. However, the association's rules must provide for certain matters, which you will be prompted to enter after you select own rules below.

The association will be:

adopting its own rules

adopting the model rules

Model rules

Complete this section only if the association is adopting all the model rules without changes. If you wish to add any further clauses (other than those below) the association must adopt its own rules.

Rule 2 - Name of association

QUANTS AND QUILLS INCORPORATED

Rule 3 - Objects

The objects for which the association is established are: *

Building a community of people interested in the intersection of technology and storytelling Running events

Rule 4 - Powers

Hacks/Hackers Brisbane

Rule 48 - Financial vear

Each year, the end date of the association's financial year will be:

Month Day of month

JUN 30

Classes of membership

The model rules allow the association to set out its classes of membership. All associations who adopt the model rules have an unlimited number of 'ordinary members'. Other classes of membership could also include associate, life or honorary membership.

Membership class 1

Name of membership class *

|--|

Membership eligibility

Describe the criteria that has to be met for this class of membership. The criteria should differentiate between the classes of membership. For example:

- must be over 18 years of age
- · must be a registered hockey player
- must support the objects of the association.

Membership eligibility criteria *

Must support the objects of the association

Must agree to be a member of the association and re-affirm membership annually

Membership limitations	M	em	bers	hip	lim	itati	ons
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Limitations refers to the voting rights and election to committees for specific membership classes.

If the association has a class of membership specifically for persons under 18 years of age, please note these members are not entitled to vote (unless permitted by law) or to hold positions on the association's management committee. If this membership class is applicable, these limitations should be reflected in this membership limitations section.

Does this membership class have any limitations? *	
Yes	● No

Agreement

I understand that the information provided in and with this application may be disclosed publicly under the *Right to Information Act 2009*.

I am aware that it is an offence to knowingly provide false information.

I have read and understood the privacy statement as outlined at the beginning of this form.

Name of signatory *	
Simon Elvery	
Name of organisation	
Position	

Payment

Des	cription	Amount	GST	Amount (incl. GST)
Incorporated association fee		\$148.00	\$0.00	\$148.00
		Total amount \$148.00	Total GST \$0.00	Total payment \$148.00
Please confirm your preferred method of pa	yment *			
☐ Credit/debit card	Valid VISA or MasterCard credit/debit card re	equired. On submis		

Pay later

Valid VISA or MasterCard credit/debit card required. On submission of this form you will be redirected to a secure payment portal hosted by the Commonwealth Bank of Australia.



If you **DO NOT** have a valid credit card ready to complete your submission at this time, please select the **Pay later** option or use the save for later function to save the form and return within 72 hours to complete payment. If you do not return within 72 hours to make payment you will have to complete the form again.

Payment must be supplied to the office **within 28 days.** If payment is not received within this timeframe, your application will be considered to be withdrawn in accordance with the provisions of the legislation.



BPAY® - Make a payment from your cheque, savings or transaction account. If paying by this option, payment should be made as soon as lodgement of the application is complete.

- * Credit/debit card If you DO NOT have a valid credit card ready to complete your submission at this time, you can select the Pay later option, then on the requisition page in the receipt it will reference a website that allows you to pay for this service using a credit/debit card at a later date.
- * Other payment options Please visit www.qld.gov.au/fairtrading

Lodgement

Online submission

Do you have a Mastercard or Visa ready to make payment of \$148.00 for this application?

Yes	○No
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On clicking the submit button at the bottom of the page, you will be redirected to the Australian Business Account page to open a secure payment portal hosted by the Commonwealth Bank of Australia.

Once the payment portal has been opened, you will NOT be able to return to this form or choose a different payment option.

Please check you have sufficient funds and a current valid VISA or MasterCard credit/debit card. The 3 digit security code from the back of your credit/debit card will be required.

Receipt

Your form has been successfully submitted. Please keep a copy of this acknowledgement for your records. To save or print a copy of the completed form and acknowledgement go to the File menu and select Save as or Print.

Your submission details:

Submission date and time (AEST)	Customer reference number (CRN)	Tracking code
09 Sep 2016 4:31:37 PM	110113803325388	FP2AFW

If you need to contact the OFT for any reason, please call 13 QGOV (13 74 68) or visit www.qld.gov.au/fairtrading.