

1995—No. 726

CO-OPERATIVES ACT 1992—REGULATION

(Relating to forms)

NEW SOUTH WALES



[Published in Gazette No. 152 of 15 December 1995]

HIS Excellency the Governor, with the advice of the Executive Council, and in pursuance of the Co-operatives Act 1992, has been pleased to make the Regulation set forth hereunder.

FAYE LO PO', M.P.
Minister for Fair Trading.

Commencement

1. This Regulation commences on 15 December 1995.

Amendments

2. The Co-operatives (General) Regulation 1992 is amended:
 - (a) by omitting from clause 50 (2) (b) the matter "Form 15" and by inserting instead the matter "Form 17";
 - (b) by omitting clauses 68–71 and by inserting instead the following clauses:

Notice regarding third party property

68. A notice referred to in clause 4A (3) of Schedule 4 to the Act is to be in Form 12.

Managing controller's report

69. (1) For the purposes of clause 6A (1) of Schedule 4 to the Act, Form 13 is the prescribed form of report.

(2) For the purposes of clause 6A (3) of Schedule 4 to the Act, the prescribed fee for the inspection of a report is the fee specified in Schedule 1 in respect of such a service.

Notification of matters relating to controller

70. (1) A notice referred to in clause 12(1), (2) (a) and (3) (a) of Schedule 4 to the Act is to be in Form 14.

(2) For the purposes of clause 12 (4) of Schedule 4 to the Act, Form 15 is the prescribed form of notice.

(3) For the purposes of clause 12 (5) of Schedule 4 to the Act, Form 16 is the prescribed form of notice.

(4) A notice referred to in clause 12 (6) of Schedule 4 to the Act is to be in Form 15.

Reporting officers' report

71. For the purposes of clause 14 (2) (b) of Schedule 4 to the Act, Form 13 is the prescribed form of report.

Report required by controller

72. (1) For the purposes of clause 15 (1) of Schedule 4 to the Act, Form 17 is the prescribed form of statement

(2) For the purposes of clause 15 (1) of Schedule 4 to the Act, Form 13 is the prescribed form of report.

Controller's accounts

73. For the purposes of clause 17 (2) of Schedule 4 to the Act, Form 18 is the prescribed form of report.

(c) by inserting at the end of the list of fees in Schedule 1 the following matter:

Fee for inspection of managing controller's report under
clause 6A (3) (b) of Schedule 4 to the Act \$20

(d) by omitting from clause 2 (b) (i) of Schedule 2 the matter "Form 18" and by inserting instead the matter "Form 19";

(e) by omitting Forms 10–16 from Schedule 4 and by inserting instead the following forms:

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lodging party or agent name _____
 address _____
 state _____
 telephone _____
 facsimile _____
 DX number _____
 suburb/city _____

Registry of Co-operatives

Form 10

(Cl.62(1) & 63)

NOTIFICATION OF
DETAILS OF A CHARGE

Co-operatives Act 1992

(Sch.3 cl.3(1)(a) & 4(1)(a))

Co-operative name
A.R.B.N. (if applicable)

This form must be lodged by

any co-operative or foreign co-operative
which creates a charge or acquires property
subject to a charge (within 45 days after
the charge was created or the property
was acquired), where the property involved
is within the State

any foreign co-operative which has an
existing charge on property within the State
and is applying for registration
(lodge with appropriate registration form)

Details of the charge

date charge was created (d/m/y)
how was the charge created?

/ / or date property was acquired (d/m/y) / /
by resolution by instrument by deposit by other conduct specify below

type of charge

fixed floating fixed and floating
If the charge is a floating charge, is the creation of subsequent charges restricted or
prohibited? Yes No

briefly describe the liability
(whether present or prospective)
secured by the charge
(no more than 4 lines)

briefly describe
the property charged
(no more than 4 lines)

name _____
details of the chargee details of the trustee for the debenture holders
(surname & given name or body corporate name) if a body corporate give A.C.N. or A.R.B.N. also

street number & name
suburb/city
office, floor, building name
country (if not Australia)

state _____ postcode _____

financial benefit

Nominate any financial benefit (such as an amount or rate percent of commission,
allowance or discount) given to someone who, absolutely or conditionally, subscribes to or
agrees to subscribe to, or procures or agrees to procure, subscriptions for any debentures
included in this notice.

Signature

This form must be signed on behalf of the co-operative or the foreign co-operative or by
an interested person

print name of person signing

capacity or nature of interest of person signing (including details of the authority you have, if signing on behalf of the
co-operative or foreign co-operative)

if signing on behalf of a co-operative or foreign co-operative, print name of co-operative or foreign co-operative and
A.R.B.N. if applicable

sign here

date / /

Documents*I declare that the statements ticked below are correct (tick boxes which apply)***charge created by issue of debentures**

I verify *the annexure marked () of () pages is a true copy of the resolution(s) passed by the co-operative authorising the issue of a series of debentures constituting the charge*
 and *I witnessed the execution of the first debenture in the series.*
 and *The annexure marked () is a true copy of the first debenture in the series.*

charge created by an instrument

The original of the instrument(s) creating or evidencing the charge is attached. OR

I verify *The annexure marked () of () pages is a true copy of the instrument(s) creating or evidencing the charge.*
 and *I witnessed the execution by the chargor of the instrument(s).*

charge existing on the property acquired

I verify *the annexure marked () of () pages is a true copy of the instrument(s) creating or evidencing the charge*

- Annexures must conform to the requirements shown at the end of this form.

Signature*This form must be signed on behalf of the co-operative or the foreign co-operative or by an interested person*

print name of person signing

*capacity or nature of interest of person signing (including details of the authority you have, if signing on behalf of the co-operative or foreign co-operative)**If signing on behalf of a co-operative or foreign co-operative, print name of co-operative or foreign co-operative and A.R.B.N, if applicable***sign here****date / /****Compliance with stamp duty law***A duly completed certification of compliance with stamp duties law*

accompanies this form
 does not accompany this form.

<i>If all the documents accompanying the form required by cl.3(1) of sch.3 have been stamped in accordance with the law relating to stamp duty, complete and attach the form. Certification of compliance with stamp duties law.</i>	<i>Provisional registration If any document accompanying this form has not been stamped as required by any law relating to stamp duty, or if this form contains the co-operative name and the name of the trustee or chargor but not all other details.</i>	<i>the Registrar will mark the entry in the Register as 'provisional' and ask you to complete the requirements.</i> <i>If the requirements have not been completed by a specified time, the Registrar will delete all particulars of the charge from the register.</i>
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Send to	Annexures	
<i>Registry of Co-operatives Bankstown Civic Tower Level 8 66-72 Rickard Road BANKSTOWN 2200 or P.O. Box 901 BANKSTOWN 2200</i>	<i>To make any annexure you must</i> <ol style="list-style-type: none"> 1. use A4 size paper of white or light pastel colour 2. provide a margin of at least 10mm on all sides 3. number the pages consecutively 4. print or type in dark blue or black ink, so that the document is clearly legible when photocopied 	<i>5. identify the annexure with a mark such as A, B, C etc.</i> <ol style="list-style-type: none"> 6. endorse the annexure with the words This annexure (mark) of (number) pages referred to in Form (form number and title) 7. sign and date the form <p><i>This annexure must be signed by same person(s) who signed the form.</i></p>

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Registry of Co-operatives

CERTIFICATION OF
COMPLIANCE WITH STAMP DUTIES LAW

Co-operatives Act 1992

Co-operative name
A.R.B.N. (if applicable)

Details of the charge

date charge was created (d/m/y)
name of chargee(s) or trustee(s)

/ /

Certification

I certify that all the documents accompanying the notification of details of this charge, in accordance with clause 3(1) of Schedule 3 of the Co-operatives Act 1992, have been duly stamped if so required and as required by any law of the Australian Capital Territory, New South Wales, the Northern Territory, Queensland, South Australia, Tasmania, Victoria and Western Australia relating to stamp duty on any such document.

This form must be signed by, or on behalf of the co-operative or the foreign co-operative or by an interested person

print name of person signing _____
capacity or nature of interest of person signing (including details of the authority you have, if signing on behalf of a co-operative or foreign co-operative)

if signing on behalf of a co-operative or foreign co-operative, print name of co-operative or foreign co-operative & A.R.B.N., if applicable _____

sign here

date / /

1995—No. 726

lodging party or agent name _____
 address _____
 state _____
 telephone _____
 facsimile _____
 DX number _____ suburb/city _____

Registry of Co-operatives

Form 11

(Cl.65)

**NOTIFICATION OF
DISCHARGE OR RELEASE OF PROPERTY
FROM A CHARGE**

**Co-operatives Act 1992
(Sch.3, Cl.10(1))**

name _____
 A.R.B.N. (if applicable) _____

Details of the registered charge

charge was originally registered under Co-operation Act 1923 under Co-operatives Act 1992
 place of registration _____
 registered charge number _____
 date charge was created (d/m/y) / /
 or date property was acquired (d/m/y) / /

title of instrument _____
 type of charge fixed floating fixed and floating

Details of the chargee

name _____ person or body corporate last entitled to the benefit of the charge (surname & given names or body corporate name)

Has the chargee changed its name since it was first entitled to the benefit of the charge?
 yes no

if yes, name (surname & given name) _____

Details of the discharge or release of property

date of discharge or release (d/m/y) / /
 extent of charge paid or satisfied in full and all property was released
 paid or satisfied to the extent of \$ _____
 paid or satisfied to the extent of \$ _____ and the property described was released
 the property described below was released

if not a full discharge,
 briefly describe
 the property released

(if insufficient space) Further details are described on page 2 or are enclosed in annexure marked (). See page 2 for requirements relating to annexure.

Signature

This form must be signed by the person, or a director, secretary or principal executive officer (PEO) of the corporation entitled to benefit from the charge (i.e. a chargee or trustee for the debenture/holders).

print name _____
 print corporation name _____
 (if body corporate entitled to benefit)

sign here

date

Send to	Annexures
Registry of Co-operatives Bankstown Civic Tower Level 8 66-72 Rickard Road BANKSTOWN 2200 or P.O. Box 901 BANKSTOWN 2200	<p>To make any annexure you must</p> <ol style="list-style-type: none">1. use A4 size paper of white or light pastel colour2. provide a margin of at least 10mm on all sides3. number the pages consecutively4. print or type in dark blue or black ink, so that the document is clearly legible when photocopied <p>5. identify the annexure with a mark such as A, B, C etc.</p> <p>6. endorse the annexure with the words</p> <p> This annexure (mark) of (number) pages referred to is Form (form number and title)</p> <p>7. sign and date the form</p> <p>This annexure must be signed by same person(s) who signed the form.</p>

Registry of Co-operatives

Form 12
(Cl. 68)
Co-operatives Act
1992 (Sch. 4 cl.
4A(3))

**NOTICE OF CONTROLLER'S INTENTION
NOT TO EXERCISE PROPERTY RIGHTS**

To: (*insert name*) of (*insert address*)
..... the *owner/*lessor of property ("the specified
property") being:

.....
(*insert name and description of property including, if appropriate, relevant reference numbers and account numbers identifying contracts such as leasing arrangements in relation to that property*).

I, (*insert name*) , of (*insert address*)
..... , the controller of property of (*insert name of co-operative*) ("the co-operative") give you notice that I do not propose to exercise rights in relation to the specified property as controller of the specified property, whether on behalf of the co-operative or anyone else.

Dated this day of 19.....

Controller's signature

Notes:

1. Under clause 4A (4) of Schedule 4 to the Co-operatives Act 1992, the controller is not liable for rent or other amounts payable by the co-operative in relation to the specified property while this notice is in force, but the notice does not affect a liability of the co-operative.
2. Under clause 4A (5) of Schedule 4, this notice ceases to have effect if the controller:
 - (a) revokes the notice, by writing to the owner/lessor; or
 - (b) exercises or purports to exercise a right in relation to the specified property as the controller.

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lodging party or agent name _____
 address _____ state _____
 telephone _____
 facsimile _____
 DX number _____ suburb/city _____

Registry of Co-operatives

REPORT AS TO AFFAIRS

Form 13

(CII.69(1), 71 & 72(2))

Co-operatives Act 1992
(Sch.4 cl. 6A(1), 14(2)(b),
15(1))

Co-operative name _____
 A.R.B.N. (if applicable) _____

Annexure

(for the purposes of the statement in Form 17 ONLY)

*delete one
 This is the annexure of pages marked "A" referred to in the
 Statement Verifying Report signed by me*/us* and dated/.... (d/m/y)
 (signature/s by each
 person who signs Form 17)

Reason for Report

tick one box managing controller clause 6A(1) of Schedule 4
 appointment of controller clause 14(2)(b) of Schedule 4
 appointment of controller clause 15(1) of Schedule 4

Assets and Liabilities

Date specified under the relevant section as the date of the report (see directions) ____/____ (d/m/y)

	Valuation (for each entry show whether cost or net book amount) \$	Estimated Realisable values \$
1. Assets not specifically charged - (a) Interests in land as detailed in Schedule A (b) Sundry debtors as detailed in Schedule B (c) Cash on hand (d) Cash at bank (e) Stock as detailed in annexed inventory (f) Work in progress as detailed in annexed inventory (g) Plant and equipment as detailed in annexed inventory (h) Other assets as detailed in Schedule C Sub Total		
	\$	\$
2. Assets subject to specific charges, as detailed in Schedule D		
Less amounts owing as detailed in Schedule D		
Total Assets		
Total estimated realizable values		

3. Less payable in advance of secured creditor(s)	_____
Amounts owing for tax instalment deductions and prescribed payments tax	_____
Amounts owing for employee entitlements as detailed in Schedule E	_____
4. Less amounts owing and secured by debenture or floating charge over assets	_____
5. Less preferential claims ranking behind secured creditors, as detailed in Schedule F	_____
6. Balances owing to partly secured creditors as detailed in Schedule G	_____
Total claims (\$)	_____
Security held (\$)	_____
7. Creditors (unsecured) as detailed in Schedule H	_____
Amount claimed (\$.....)	_____
8. Contingent assets (\$.....)	_____
Estimated to produce as detailed in Schedule I	
9. Contingent liabilities (\$)	_____
Estimated to rank as detailed in Schedule J	
<input type="checkbox"/> Estimated deficiency or	
<input type="checkbox"/> Estimated surplus	
<input type="checkbox"/> Subject to costs of administration or	
<input type="checkbox"/> Subject to costs of liquidation	
Share capital	\$_____
Issued	\$_____
Paid up	\$_____

Schedules

SCHEDULE A (2)

INTERESTS IN LAND

Address and description of property	(1) Valuation	Estimated realizable value	Valuation for rating purposes	Particulars of tenancy	Where possession of deeds may be obtained	Short particulars of title
	\$	\$	\$			

Schedules

SCHEDULE B (2)

SUNDRY DEBTORS (INCLUDING LOAN DEBTORS)

Name and address of debtor	Amount owing	Amount realizable	Deficiency	Particulars of Security (if any) held	Explanation of deficiency
	\$	\$	\$		

SCHEDULE C (2)

OTHER ASSETS

Description of deposit or investment	Cost	Amount Realizable
	\$	\$

Deposits

Investments

SCHEDULE D (2)

ASSETS SUBJECT TO SPECIFIC CHARGES

Description of asset	Date charge given	Description of charge	Holder of charge	Terms of repayment	(1) Valuation value	Estimated realizable value	Amount owing under charge
					\$	\$	\$

Schedules

SCHEDULE E
CLAIMS BY EMPLOYEES

Employee's name and address	Wages	Holiday pay	Long service leave	Estimated liability
	\$	\$	\$	\$

SCHEDULE F

PREFERENTIAL CREDITORS (OTHER THAN THOSE DETAILED IN SCHEDULE E)

Name and address of preferential creditor	Description of amount owing	Amount owing
		\$

SCHEDULE G
PARTLY SECURED CREDITORS

Name and address of creditor	Particulars of security held	Nature of security	Estimated value of security	Amount owing to creditor	Amount estimated to rank as unsecured
			\$	\$	\$

Schedules

SCHEDULE H
UNSECURED CREDITORS

Name and address of creditor	Amount claimed by creditor	Amount admitted as owing	Reasons for difference between amount claimed and admitted (if any)
<hr/>			

SCHEDULE I
CONTINGENT ASSETS

Description of asset	Gross asset	Estimated to produce
	\$	\$

SCHEDULE J
CONTINGENT LIABILITIES

Name and address of creditor	Nature of liability	Gross liability	Estimated rank for
		\$	\$

Certification

I certify that the particulars contained in the above report as to affairs are true to the best of my knowledge and belief.

Dated this day of 19

Signature.....

(1) Indicate in respect of each entry whether cost or net book amount.

DIRECTIONS

1. This report is to be made as at the following dates:
 - (a) where prepared by the managing controller under clause 6A(1) of Schedule 4 - a day not later than 30 days before the day when it is prepared
 - (b) where submitted to a controller under clause 14(2) of Schedule 4 - the control day
 - (c) where submitted to the controller under clause 15 of Schedule 4 - the date specified by the controller by notice.
2. Where this report is required under clause 15(1) of Schedule 4, the report is to be verified by a statement in writing, in accordance with Form 17, by a person referred to in that Subclause.
3. When a copy of this report is lodged with the Registrar of Co-operatives pursuant to clause 14(2)(c) of Schedule 4, the report must be certified by the controller of the property of the Co-operative as a true copy of the original report.

Additional Requirements

Purpose for lodgement of copy of form 17
(tick appropriate box and complete date)

by the managing controller of property under clause 6A(2) of Schedule 4
(to be lodged within 2 months after the control day)
if a receiver and manager - date of appointment (d/m/y)/...../.....

if a person who is in possession or has control of
the property for the purpose of enforcing a charge
date when person took control (d/m/y)/...../.....

by the controller of property under clause 14(2)(c) of Schedule 4
(to be lodged within 7 days after the receipt of the report)
date of receipt of report (d/m/y)/...../.....

Send to	Annexures
Registry of Co-operatives Bankstown Civic Tower Level 8 66-72 Rickard Road BANKSTOWN 2200 or P.O. Box 901 BANKSTOWN 2200	To make any annexure you must 1. use A4 size paper of white or light pastel colour 2. provide a margin of at least 10mm on all sides 3. number the pages consecutively 4. print or type in dark blue or black ink, so that the document is clearly legible when photocopied
	5. identify the annexure with a mark such as A, B, C etc. 6. endorse the annexure with the words The annexure (mark) of (number) pages referred to in Form (form number and title) 7. sign and date the form This annexure must be signed by same person(s) who signed the form.

lodging party or agent name _____
 address _____
 state _____
 telephone _____
 facsimile _____
 DX number _____ suburb/city _____

Registry of Co-operatives

Form 14

(Cl.70(1))
Co-operatives Act 1992
 (Sch.4, Cl.12(1), 12(2)(a),
 12(3)(a))

Notification that a person has
 been appointed controller/
 entered into possession etc.

Co-operative name A.R.B.N. (if applicable)	co-operative in respect of which the controller was appointed/entered into possession etc.	
This notice is being given by	<input type="checkbox"/> the person who obtained an order for the appointment of, or who appointed, the receiver under clause 12(1) of Schedule 4 <input type="checkbox"/> the appointee of the controller under clause 12(2)(a) of Schedule 4 <input type="checkbox"/> the controller under clause 12(3)(a) of Schedule 4	
Details of the appointment/entry into possession etc. (tick one box)		
<input type="checkbox"/> receiver of the property described in the schedule to this form <input type="checkbox"/> receiver & manager of the property described in the schedule to this form <input type="checkbox"/> controller (other than a receiver or managing controller) of the property described in the schedule to this form <input type="checkbox"/> managing controller (other than a receiver and manager) of the property described in the schedule to this form		
<input type="checkbox"/> appointment by court order court <input type="checkbox"/> <u>Federal Court of Australia (give State or Territory registry)</u> <input type="checkbox"/> <u>Family Court of Australia (give State or Territory registry)</u> <input type="checkbox"/> <u>Supreme Court of (give State or Territory)</u> <input type="checkbox"/> <u>Other (specify)</u> _____		
date of obtaining order <u> / / </u> proceeding matter number <u> / / </u> year <u> / / </u>		
<input type="checkbox"/> appointment by or under instrument date of appointment/entry into possession etc. (d/m/y) <u> / / </u> date of instrument (d/m/y) <u> / / </u>		
description of instrument _____ _____		
(tick one of the following boxes)		
<input type="checkbox"/> instrument is registered in <u> / / </u> registered charge number <input type="checkbox"/> <u>Registry of Co-operative Charges</u> <u> / / </u> registered charge number <input type="checkbox"/> <u>Australian register of company charges</u> <u> / / </u> registered charge number <input type="checkbox"/> <u>register of company charges of State or Territory (give State or Territory)</u> <u> / / </u> registered charge number		
<input type="checkbox"/> instrument not registered <u> / / </u>		

Details of the person(s) appointed

name (surname & given names) at the office of office, floor, building name street number & name suburb/city country (if not Australia) type of appointment	<u> / / </u> state <u> / / </u> postcode
<input type="checkbox"/> appointed singly <input type="checkbox"/> appointed jointly <input type="checkbox"/> appointed jointly and severally	
name (surname & given names) at the office of office, floor, building name street number & name suburb/city country (if not Australia) type of appointment	<u> / / </u> state <u> / / </u> postcode
<input type="checkbox"/> appointed singly <input type="checkbox"/> appointed jointly <input type="checkbox"/> appointed jointly and severally	

Signature

This form must be signed by

- (a) where the form is lodged for the purposes of clause 12(1) or clause 12(2)(a) of Schedule 4, by the person who obtains an order for the appointment of, or who appoints, the controller; or
- (b) where the form is lodged for the purposes of clause 12(3)(a) of Schedule 4, by the controlled.

print name _____ name of corporation (if applicable) _____
 capacity _____ director secretary principal executive officer

sign here _____ date / /

Schedule of property

(if insufficient space) Further details are enclosed in the annexure marked () of () pages

Send to	Annexures
Registry of Co-operatives Bankstown Civic Tower Level 8 66-72 Rickard Road BANKSTOWN 2200 or P.O. Box 901 BANKSTOWN 2200	To make any annexure you must <ol style="list-style-type: none"> 1. use A4 size paper of white or light pastel colour 2. provide a margin of at least 10mm on all sides 3. number the pages consecutively 4. print or type in dark blue or black ink so that the document is clearly legible when photocopied 5. identify the annexure with a mark such as A, B, C etc. <ol style="list-style-type: none"> 6. endorse the annexure with the words This annexure (mark) of (number) pages referred to in Form (form number and title) 7. sign and date the form This annexure must be signed by same person(s) who signed the form.

lodging party or agent name _____
 address _____
 telephone _____ state _____
 facsimile _____
 DX number _____ suburb/city _____

Registry of Co-operatives

Form 15

(CII.70(2)&(4))
 Co-operatives Act 1992
 (Sch. 4, Cl.12(4) & (6))

Notification of
 appointment or cessation as an
 external administrator

Co-operative name _____
 A.R.B.N. (if applicable) _____

Details of person(s) appointed

name (surname & given names)
 at the office of
 office, floor, building name
 street number and name
 suburb/city
 country (if not Australia)
 type of appointment

 _____ state _____ postcode _____
 appointed singly appointed jointly appointed jointly and severally

name (surname & given names)
 at the office of
 office, floor, building name
 street number and name
 suburb/city
 country (if not Australia)
 type of appointment

 _____ state _____ postcode _____
 appointed singly appointed jointly appointed jointly and severally

Appointment

type of administrator
 (tick one box)

- administrator of a compromise or arrangement
- receiver of the property described in the schedule of property to this form
- receiver & manager of the property described in the schedule of property to this form
- managing controller (other than a receiver & manager) of the property described in the schedule of property to this form
- controller (other than a receiver or managing controller) of the property described in the schedule of property to this form
- administrator of a co-operative under administration
- administrator of a deed of company arrangement
- liquidator in a winding up by Court liquidator in a voluntary winding up by members
- liquidator in a voluntary winding up by creditors provisional liquidator

method of appointment

appointment by court order Federal Court of Australia (give State or Territory registry)
 Family Court of Australia (give State or Territory registry)
 Supreme Court of (give State or Territory registry)
 Other (specify) _____

date of obtaining order (d/m/y) / /

proceeding matter number _____

year _____

appointment by or under instrument

date of appointment (d/m/y) / /

date of instrument (d/m/y) / /

description of instrument

(tick one of the following boxes)

instrument is registered in

- Register of co-operative charges registered charge number _____
- Australian register of company charges registered charge number _____
- register of company charges of State or Territory (give State or Territory) registered charge number _____

instrument not registered name of appointer

by company by writing under its common seal

by liquidator or provisional liquidator

Ceasing, resignation or removal

(If a controller, show details of method of appointment above)

<input type="checkbox"/> cessation of administrator of compromise or arrangement	date (d/m/y) / /
<input type="checkbox"/> cessation of receiver	date (d/m/y) / /
<input type="checkbox"/> cessation of receiver & manager	date (d/m/y) / /
<input type="checkbox"/> cessation of managing controller	date (d/m/y) / /
<input type="checkbox"/> (other than receiver & manager)	date (d/m/y) / /
<input type="checkbox"/> cessation of controller	date (d/m/y) / /
<input type="checkbox"/> (other than receiver or managing controller)	date (d/m/y) / /
<input type="checkbox"/> cessation, resignation or removal of administrator of a co-operative under administration	date (d/m/y) / /
<input type="checkbox"/> cessation, resignation or removal of administrator of deed of company arrangement	date (d/m/y) / /
<input type="checkbox"/> resignation or removal of liquidator	date (d/m/y) / /
<input type="checkbox"/> resignation or removal of provisional liquidator	date (d/m/y) / /

Signature

This form must be signed by the external administrator

print name _____

sign here _____ date / /

Schedule of property

(if insufficient space) Further details are enclosed in annexure marked () of () pages.

Additional information requirements

If this notice is lodged to notify the ceasing, resignation, removal of an external administrator or where an administrator has been appointed to replace a currently appointed person or persons, please show below, the details of the person or persons who have resigned etc. If joint administrators, show only the names of the person or persons who have resigned etc.

name _____
 name _____
 name _____

If one of the following administrators, please tick appropriate box and complete date of appointment of the person(s) who have ceased etc.

<input type="checkbox"/> receiver	appointment date (d/m/y) / /
<input type="checkbox"/> receiver and manager	appointment date (d/m/y) / /
<input type="checkbox"/> managing controller (other than a receiver & manager)	appointment date (d/m/y) / /
<input type="checkbox"/> controller (other than a receiver or managing controller)	appointment date (d/m/y) / /

Please note that failure to supply this information may result in the rejection of this document.

Send to

Registry of Co-operatives
Bankstown Civic Tower
Level 8
66-72 Rickard Road
BANKSTOWN 2200
or
P.O. Box 901
BANKSTOWN 2200

Annexures

To make any annexure you must

- use A4 size paper of white or light pastel colour
- provide a margin of at least 10mm on all sides
- number the pages consecutively
- print or type in dark blue or black ink, so that the document is clearly legible when photocopied
- identify the annexure with a mark such as A, B, C etc.
- endorse the annexure with the words This annexure (mark) of (number) pages referred to in Form (form number and title)
- sign and date the form

This annexure must be signed by same person(s) who signed the form.

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lodging party or agent name _____
 address _____
 state _____
 telephone _____
 facsimile _____
 DX number _____ suburb/city _____

Registry of Co-operatives

Form 16

(Cl.70(3))
Co-operatives Act 1992
 Sch. 4, Cl. 12(5)

Notification of
change of address of an
external administrator

Co-operative name _____
 A.R.B.N. (if applicable) _____

Details of the external administrator

tick one box

- administrator of a compromise or arrangement
- receiver
- receiver & manager
- managing controller (other than receiver & manager)
- controller (other than receiver or managing controller)
- administrator of co-operative under administration
- administrator of deed of company arrangement
- liquidator
- provisional liquidator

name (surname & given names) _____

New address

date of change (d/m/y) _____ / /
 at the office of (name of firm) _____
 office, floor, building name _____
 street number & name _____
 suburb/city _____ state _____ postcode _____
 country (if not Australia) _____

Signature

This form must be signed by the external administrator

print name _____

sign here _____ date _____

STATEMENT VERIFYING REPORT

**Form 17
(C1. 72)
Co-operatives Act
1992 (Sch. 4 cl.
15 (1))**

I, (insert name), of (insert address)
.....

verify that:

- (a) I am (insert description sufficient to show that the person making the statement is a person referred to in clause 15 (I) of Schedule 4 of the Co-operatives Act 1992) of Limited and
- (b) the particulars contained in the report as to affairs relating to Limited, dated in the annexure marked "A" and signed by me are true to the best of my knowledge and belief.

Dated this day of 19.....

Signature

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lodging party or agent name _____
 address _____
 state _____
 telephone _____
 facsimile _____
 DX number _____ suburb/city _____

Registry of Co-operatives

Form 18

(Cl.73)

Presentation of
 accounts by scheme administrator/
 controller/administrator of deed
 of company arrangement

Co-operatives Act 1992
 (Sch. 4, Cl. 17(2))

Co-operative name _____
 A.R.B.N. (if applicable) _____

Action

Are the attached accounts final? yes date of ceasing (d/m/y) / /
 no period of accounts (d/m/y) from / / to / /

Details of the scheme administrator/controller/administrator of deed of company arrangement

(tick one box) administrator of a compromise or arrangement
 receiver
 receiver & manager
 managing controller (other than receiver & manager)
 controller (other than receiver or managing controller)
 administrator of deed of company arrangement

name (surname & given name) _____
 at the office of _____
 office, floor, building name _____
 street number & name _____
 suburb/city _____ state _____ postcode _____
 country (if not Australia) _____

Details of the original appointment (only complete this section if you are a controller)

appointment by court order
 court Federal Court of Australia (give State or Territory registry)
 Family Court of Australia (give State or Territory registry)
 Supreme Court of (give State or Territory)
 date of obtaining order (d/m/y) / / proceeding matter number _____ year _____

appointment by instrument
 date of appointment (d/m/y) / / date of instrument (d/m/y) / /
 description of instrument (tick one of the boxes)
 instrument is registered in _____
 Register of co-operative charges registered charge number _____
 the Australian register of company charges registered charge number _____
 the register of company charges of a State or Territory (give State or Territory) registered charge number _____

instrument not registered name of appointer _____

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Statements about receipts and payments

during all preceding periods since the date of appointment/control day

aggregate amount of receipts	\$
aggregate amount of payments	\$

amount owing under instrument at

<input type="checkbox"/> date of appointment/control day	\$
<input type="checkbox"/> date of this account	\$
<input type="checkbox"/> estimated value of property subject to the instrument at date of this account	\$

Statements of receipts and payments during period of this notification

receipts from	date	amount \$
---------------	------	-----------

payments to	date	amount \$
-------------	------	-----------

(if insufficient space). Further details are enclosed in annexure marked () of () pages

Signature

This form must be signed by the scheme administrator/controller/administrator of deed of company arrangement

print name _____ capacity _____

sign here _____ date _____ / _____ / _____

Send to	Annexures
Registry of Co-operatives Bankstown Civic Tower Level 8 66-72 Rickard Road BANKSTOWN 2200 or P.O. Box 901 BANKSTOWN 2200	To make any annexure you must 1. use A4 size paper of white or light pastel colour 2. provide a margin of at least 10mm on all sides 3. number the pages consecutively 4. print or type in dark blue or black ink, so that the document is clearly legible when photocopied 5. identify the annexure with a mark such as A, B, C etc. 6. endorse the annexure with the words This annexure (mark) of (number) pages referred to in Form (form number and title) 7. sign and date the form The annexure must be signed by same person(s) who signed the form.

POSTAL BALLOT PAPER

Form 19
(Sch. 2 cl. 2 (b))
(i)
Co-operatives Act
1992

Name of co-operative

Ballot of members to determine the following proposal:

.....

The ballot will close at noon on

HOW TO VOTE

1. Read these directions and the ballot paper carefully.
2. Complete and sign the details on the reverse side of the middle envelope.
3. If you are in favour of the proposal, insert the word "YES" in the square on the ballot paper. If you are not in favour of the proposal insert the word "NO".
4. After marking the ballot paper, fold it and place it in the small envelope provided and seal the envelope. Then place this envelope in the middle envelope and place the middle envelope in the envelope addressed to the returning officer. Forward this envelope either by post or by personal delivery so as to reach the returning officer not later than noon on
5. Unless the ballot paper is marked as indicated in note 3 above and the details referred to in note 2 above are completed in full and signed your vote may be rejected as informal.

.....
 (Initials of returning officer)

BALLOT PAPER

Are you in favour of the proposals as referred to above?

EXPLANATORY NOTE

The Co-operatives Amendment Act 1995 amended some of the provisions of the Co-operatives Act 1992 that deal with receivers and other controllers of property of co-operatives.

The object of this Regulation is to prescribe new forms required as a result of those amendments as well as new forms relating to other provisions of the Co-operatives Act 1992. Those forms deal with the following matters:

- (a) the giving of notice of the details of a charge (Form 10);
- (b) the giving of notice of the discharge or release of property from a charge (Form 11);
- (c) the giving of notice of a controller's intention not to exercise certain property rights (Form 12);
- (d) the form of any report as to the affairs of a co-operative prepared by a managing controller or prepared on the appointment of a controller (Form 13);
- (e) the giving of notice that a person has been appointed as a controller (Form 14);
- (f) the giving of notice that a person has been appointed as an external administrator or that their appointment has ceased (Form 15);
- (g) the giving of notice of the change of address of an external administrator (Form 16);
- (h) the verification of reports as to the affairs of a co-operative (Form 17);
- (i) the accounts of a co-operative (Form 18);
- (j) the form of ballot paper for a postal ballot on proposals for resolution (Form 19).

This Regulation also imposes a fee for the inspection of a managing controller's report about a co-operative's affairs.

This Regulation is made under the Co-operatives Act 1992, including section 446 (the general regulation-making power).
