

17 March 2025

Dear Affiliate

Please find attached a non-Dogs Victoria member services levy form for the period ending 31 March 2025 for action and return. This payment contributes to the upkeep of association facilities and administration necessary for the effective support to affiliate clubs, and as a paid member ensures that you are covered by our public liability and personal accident insurance policies.

As advised in previous correspondence, Dogs Victoria affiliates will be required to collect \$10.00 for singles and \$19.50 for family non-members and forward payments together with the attached levy form within 14 days of 31 March, 30 June, 30 September and 31 December each year.

A copy of the list of non-members should be forwarded with your quarterly payment.

Affiliates should note that Dogs Victoria accepts the following will not have to make a contribution:

- Non-participating life members, interstate or overseas members of an affiliate do not have to pay the levy.

Payments for the quarter ending 31 March 2025 are due to be received at the office by 14 April 2025.

Affiliates who have any questions relating to this levy may contact the Dogs Victoria finance team at [etimewell@dogsvictoria.org.au](mailto:etimewell@dogsvictoria.org.au)

Yours sincerely,

*Eva Timewell*

Office Operations Admin Officer  
Dogs Victoria

## TAX INVOICE NON DOGS VICTORIA MEMBER SERVICES LEVY FORM

**Include Personal Accident / Member to Member Insurance**

Name of Affiliate: \_\_\_\_\_

Number of members who <b>joined</b> since previous lodgement	Single .....	Dual/Family .....
Number of members who <b>renewed</b> since previous lodgement	Single .....	Dual/Family .....
<i>Sub Total</i>	Single .....	Dual/Family .....
<i>Less number of Dogs Victoria Members</i>	Single .....	Dual/Family .....
<b>Total</b>	<b>Single .....</b>	<b>Dual/Family .....</b>

Levy Payment (including GST) for period ending 31/03/2025    **Single** .....

**Bank Details**

**Bank:** Bendigo Bank

**BSB:** 633 000

**Account Number:** 112552542

**Account Name:** Victorian Canine Association Inc

**Payment Reference:** Affiliate name - NML

e.g. 25 x \$10.00 = \$250.00

**Dual /Family** .....

e.g. 25 x \$19.50 = \$487.50

**Total \$** .....

☐

I return this form, with the information above completed and attach payment and a list of our non-members. Cheque Number/ Reference Number \_\_\_\_\_

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I return this form and state that my club has no non-members to declare.

Name of Secretary: \_\_\_\_\_

Secretary's Signature: \_\_\_\_\_

Phone Number: \_\_\_\_\_