



Electronic transfer banking version



MAIN CALL SIGN USED

STATION LOCATION

61st JOTA - 22nd JOTI PARTICIPATION REPORT AND BADGE ORDER FORM

IMPORTANT: Each GROUP or Section MUST SUBMIT THEIR OWN REPORT and BADGE ORDER FORM

Please submit this completed form by pressing the "Submit by Email" button, and you may print a copy for yourself by pressing the "Print Form" button. Transfer details: My State Credit Union - BSB 807-009 Account 51326462 "THE SCOUT ASSOCIATION (TREAT). Your Report will be used to produce the Branch and National Reports. Please give as much information as possible. Your yarns, photographs and newspaper articles may also be emailed to me at:- dodd.pc@bigpond.com Please submit your reports by the 30th NOVEMBER 2018- thank you

GROUP DISTRICT REGION

LEADER IN CHARGE Phone

MAIL BADGES TO: SECTION

ADDRESS SUBURB / TOWN Post Code

Phone (H) Mobile e-mail

EACH GROUP or SECTION MUST COMPLETE

Joey Scouts	Cub Scouts	Scouts	Venturers	Rovers	Scouters	Guides	Guide Leaders	Parents and Friends	TOTAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

The Following NUMBER of CONTACTS were made:- TASMANIA AUSTRALIAN STATES OVERSEAS We participated in:-

Quantity	Unit Price	TOTAL	Electronic banking reference
Please Forward <input type="text"/>	2018 JOTA/JOTI Badge(s) <input type="text"/>	<input type="text"/>	<input type="text"/>

Submit via Email

AMATEUR RADIO OPERATORS:

Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>	Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>
Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>	Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>
Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>	Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>
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Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>	Name <input type="text"/>	VK7 <input type="text"/>	Level <input type="text"/>

TREAT USE ONLY

DATE RECEIVED RECEIPT # NUMBER OF BADGES SENT NUMBER OF OPERATOR CARDS SENT

NUMBER OF OPERATOR LEVEL BADGES SENT DATE SENT INFORMATION ENTERED