

## 8.3 FRIENDS OF RESERVES: FORM 3

### REQUEST FOR SHIRE OF KALAMUNDA ASSISTANCE

NAME OF FRIENDS GROUP \_\_\_\_\_

AT (RESERVE ADDRESS) \_\_\_\_\_

RESERVE CODE NO. \_\_\_\_\_

WORK PLANNED FOR FINANCIAL YEAR \_\_\_\_\_ / \_\_\_\_\_

(LISTED IN PRIORITY ORDER)

DATE / MONTH	FRIENDS GROUP ACTIVITY / RESPONSIBILITY (EG WEEDING, PLANTING ETC)	SHIRE ASSISTANCE REQUESTED (EG PLANTS, SEEDS, BUSHCREW, RUBBISH COLLECTION, ROUNDUP, SIGN, DIEBACK INJECTION ETC)

All funds will be held by the Shire of Kalamunda until invoiced by suppliers of goods and services. Quotes for works are to be submitted to the Environmental Reserves Officer prior to commencement of work.

Please return as soon as possible to:

Shire of Kalamunda  
PO BOX 42  
KALAMUNDA WA 6076