









Disclosure Return lodged by: SLC

Statement

Third Party/Donor	Springfield Land Corporation
Postal Address	Springfield Land Corporation Level 10, Springfield Lower 145 Sinnathamby Boulevard Springf 4 3 0 0
Telephone	(07) 3819 9999
Facsimile	(07) 3819 9900
Email	

Name of the person making the certification on behalf of the third party/donor:  
Robert Sharpless

I certify that the information contained in this return and any attachments is true and complete; or

This return is incomplete, and I state the following:

The nature and type of the particulars which are unable to be obtained:

\_\_\_\_\_

\_\_\_\_\_

Why these particulars have not been obtained:

\_\_\_\_\_

\_\_\_\_\_

Is another person able to provide these details? If so, please provide their contact details:

\_\_\_\_\_

\_\_\_\_\_

Signature  Date 17/5/16

Disclosure Period for this Return From 6/2/16 to 19/3/16