

# Corporate Fundraising Guidelines



Princess Margaret Hospital Foundation



PRINCESS MARGARET HOSPITAL  
*foundation*



## Princess Margaret Hospital Foundation

# Corporate Fundraising Guidelines

Princess Margaret Hospital Foundation (PMHF) abides by the Charitable Collections Act 1946. In granting an Endorsement Letter, PMH Foundation requests that you adhere to the following fundraising guidelines.

## Getting started

1. All fundraising activity must be endorsed by PMH Foundation. Once we have received your signed Corporate Fundraising Agreement, Application Form and Budget Outline, and we are satisfied that the fundraising activity fits with the philosophy and policies of the Foundation we will forward your endorsement letter.
2. PMH Foundation will not endorse fundraising which involves any activity that does not fit with Princess Margaret Hospital's values.
3. To value add to your business, we will consider consenting to the use of our Stitches logo where appropriate. In recognition of the value of our logo, an initial start-up fee of \$10,000 applies.

## Once endorsed

4. You, as the project coordinator, take responsibility for all organisational aspects of the project. This may include soliciting prizes, organising publicity, and providing goods or services. The Foundation is here to provide advice and guidance when needed.
5. Any documents/promotional material used by the coordinator in relation to the fundraising activity must be approved by PMH Foundation. If you the project coordinator wish to incorporate PMH Foundation's logo on any materials or products, the coordinator must obtain prior permission from the PMHF Communications Manager before printing.
6. In order to maintain the confidentiality of patients and ex-patients, generally children must not be involved in externally organised fundraising events or publicity. PMHF will be the sole judge of this situation.
7. Third party fundraisers are not covered by PMH Foundation's insurance and therefore you need to seek your own Public Liability Insurance.

## Raffles

8. If you intend to hold a raffle where the sale of tickets and declaration of the result takes place on the same day and at the same premises and the aggregate value of prizes offered does not exceed \$1000 (Small Private Lottery), PMH Foundation can provide their standard raffle tickets and no permit is necessary.
9. If you intend to sell raffle tickets to the public for more than one day (Standard Lottery) you need to obtain a permit from the Department of Racing Gaming and Liquor. In this case, it is the your responsibility to submit an application to the Department and print raffle tickets.

The produced raffle tickets must show:

- Permit number
- Ticket price
- Description and value of prizes
- Ticket number
- Name and contact number of permit holder
- Name of organisation
- Closing date of ticket sales and drawing date
- Name and date of issue of the publication in which results are to appear



## Receipts

10. Your receipt will be issued once the following items have been returned to PMH Foundation;
  - Monies raised
  - Statement of Income and Expenditure
  - Receipt books
  - Unused raffle tickets
11. Receipts for tax purposes can only be issued to people giving donations of money.

**The following are not tax deductible:**

  - Raffle ticket purchases
  - Purchases of goods (e.g. chocolates, merchandise) or services
  - Purchases of goods and services at an auction

**The following are tax deductible:**

  - Donations above \$2.00
  - Some memorabilia purchases made at an auction (see 11. below)
12. As of 1 July 2004, individuals are able to receive a tax deduction for the net amount of a donation made to a deductible gift recipient, which has an associated minor benefit. The deduction will be available for cash donations above \$250, where the value of the benefit received by the donor is no more than 10% of the donation or \$100, whichever is less. If you believe this may be applicable to your event please contact your tax advisor to confirm the exact ruling.

## Financial Records

13. PMH Foundation must comply with the obligations and regulations imposed on it by the Charitable Collections Act 1946. Therefore, all money collected must be accurately recorded by the Project Coordinator on a Statement of Income and Expenditure, which will be provided with your letter of endorsement. This must be presented to PMH Foundation together with the net funds raised within twenty-eight (28) days of the event/project.
14. If your event included a raffle, please be aware that the financial records including the ticket butts, details of ticket sellers and prize winners, banking records and unclaimed prizes must be submitted to the PMHF Fundraising Manager at the end of the event/project. You must also submit a copy of the return sent to Department of Racing Gaming and Liquor.

## Disclaimer

15. PMHF reserves the right to withdraw its approval for the event/project at any time if it appears that there is a likelihood of the event/project failing to adhere to any of the above terms and conditions.
16. Further to this, endorsement letters will not be issued where the viability of the fundraising activity is in doubt.

## Helpful Contacts

Department of Racing Gaming and Liquor

**Web:** [www.orgl.wa.gov.au](http://www.orgl.wa.gov.au)

**Phone:** (08) 9425 1888

Fundraising Institute of Australia (FIA)

**Web:** [www.fia.org.au](http://www.fia.org.au)

**Phone:** (02) 9411 6644



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## Corporate Fundraising Agreement

1. I, \_\_\_\_\_  
(Project Coordinator's Name) accept the terms and conditions of the Fundraising Agreement set out in the PMHF Corporate Fundraising Guidelines document.
2. I agree to conduct my project, \_\_\_\_\_  
(name of project) in accordance with those terms and conditions and in a manner which upholds Princess Margaret Hospital Foundation's integrity, professionalism and ethos.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Please complete and return this Fundraising Agreement together with the following Application Form to:

Lesley Hooper  
Fundraising Manager  
PMH Foundation  
254 Railway Parade  
West Leederville, WA 6007

Phone: (08) 9489 1100  
Fax: (08) 9489 1199  
Email: [Lesley.hooper@pmhfoundation.com](mailto:Lesley.hooper@pmhfoundation.com)  
Web: [www.pmhfoundation.com](http://www.pmhfoundation.com)

### PMH Foundation Corporate Fundraising project approval

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Lesley Hooper - Fundraising Manager







Do you require tax deductible receipts? *(These are only available if you are taking donations, not applicable if a person is receiving something for their money eg. raffle, event or merchandise)*

No  Yes

Will any other organisation benefit from the fundraising?

No  Yes

Name of organisation: \_\_\_\_\_

Will you need PMH Foundation to provide any of the following: *(Please tick all that apply)*

Signage *(If seen necessary by PMH Foundation)*

Collection Tins Amount: (Maximum 10 tins) \_\_\_\_\_

Merchandise

Raffle Tickets - 50 tickets per book Amount: (Maximum 20 books) \_\_\_\_\_

Other *(Please explain in detail if you require any further collateral/assistance from PMH Foundation. Please bear in mind that as a charity our resources and time are limited)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you raised funds for PMH Foundation before? Please tick appropriate box

No  Yes When? \_\_\_\_\_

How? \_\_\_\_\_

Will you be advertising/publicising your project?

*(PMHF must approve any advertising including media releases and advertisements that include the PMH Foundation name and/or logo)*

No  Yes

Please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



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# Corporate Fundraising Budget Outline

- The project must have the potential for financial success so that neither the organisers nor Princess Margaret Hospital Foundation are liable for unpaid expenses.
- Accounting for funds received and expended must be a standard acceptable to Princess Margaret Hospital Foundation.
- Princess Margaret Hospital Foundation must be made aware of any major expenses prior to the event/project.

THE SECTION BELOW MUST BE COMPLETED

## Projected Income

_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
<b>Total</b>	\$

## Proposed Expenditure

_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
<b>Total</b>	\$

**Estimated donation to Princess Margaret Hospital Foundation**  
(ie. total income - total expenditure) \$ \_\_\_\_\_

1. How will you donate from this project?  
 Percentage of service charge/product fee     Flat rate per service charge/product fee?  
 Other (please explain)  
 \_\_\_\_\_  
 \_\_\_\_\_

2. How often will you deposit donated funds to Princess Margaret Hospital Foundation?  
 Monthly                       Quarterly                       Annually



Princess Margaret Hospital Foundation

# Corporate Fundraising Approval

Name of Project Coordinator:

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Signed:

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Date

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Signed:

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Date

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Lesley Hooper - Fundraising Manager