



Fair Work
Commission

30 October 2025

Lloyd Williams
National Secretary
Health Services Union
Sent via email: hsu@hsu.net.au
CC: sthompson@hallchadwick.com.au

Dear Lloyd Williams

**Health Services Union
Financial Report for the year ended 30 June 2025 – (FR2025/144)**

I acknowledge receipt of the financial report for the year ended 30 June 2025 for the Health Services Union. The documents were lodged with the Fair Work Commission (the Commission) on 20 October 2025.

The financial report has now been filed. You are not required to take any further action in respect of the report lodged.

The financial report was filed based on a primary review. This involved confirming that the financial reporting timelines required under sections 253, 265, 266 and 268 of the *Fair Work (Registered Organisations) Act 2009* (RO Act) have been satisfied, all documents required under section 268 of the RO Act were lodged and that various disclosure requirements under the Australian Accounting Standards, RO Act and reporting guidelines have been complied with. A primary review does not examine all disclosure requirements.

Please note that next year's financial report may be subject to an advanced compliance review.

Reporting Requirements

The Commission's website provides a number of factsheets in relation to the financial reporting process and associated timelines. The website also contains the section 253 reporting guidelines and a model set of financial statements.

The Commission recommends that reporting units use these model financial statements to assist in complying with the RO Act, the section 253 reporting guidelines and Australian Accounting Standards. Access to this information is available via [this link](#).

If you have any queries regarding this letter, please call 1300 341 665 or email regorgs@fwc.gov.au.

Yours sincerely

Fair Work Commission

Health Services Union

s.268 *Fair Work (Registered Organisations) Act 2009*

Certificate by prescribed designated officer

Certificate for the year ended 30 June 2025

I, Lloyd Williams, being the National Secretary of the Health Services Union certify:

- that the documents lodged herewith are copies of the full report for the Health Services Union for the period ended referred to in s.268 of the *Fair Work (Registered Organisations) Act 2009*; and
- that the full report was provided to members of the reporting unit on 1st September 2025; and
- that the full report was presented to a meeting of the National Executive of the reporting unit on 17th October 2025 in accordance with s.266 of the *Fair Work (Registered Organisations) Act 2009*.

Signature of prescribed designated officer:



Name of prescribed designated officer:

Lloyd Williams

Title of prescribed designated officer:

National Secretary

Dated:



Financial Statements 2024–25

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**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF HEALTH SERVICES UNION NATIONAL OFFICE**

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Health Services Union National Office, which comprises the statement of financial position as at 30 June 2025, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended 30 June 2025, notes to the financial statements including material accounting policy information; the national executive statement, the subsection 255(2A) report and the officer declaration statement.

In our opinion, the accompanying financial report presents fairly, in all material aspects, the financial position of Health Service Union National Office as at 30 June 2025, and its financial performance and its cash flows for the year ended on that date in accordance with:

- a) the Australian Accounting Standards; and
- b) any other requirements imposed by the Reporting Guidelines or Part 3 of Chapter 8 of the *Fair Work (Registered Organisations) Act 2009* (the RO Act).

We declare that management's use of the going concern basis in the preparation of the financial statements of the Reporting Unit is appropriate.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Reporting Unit in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information Other than the Financial Report and Auditor's Report Thereon

The National Executive is responsible for the other information. The other information obtained at the date of this auditor's report is in the Operating Report accompanying the financial report.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

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**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF HEALTH SERVICES UNION NATIONAL OFFICE**

Responsibilities of the National Executive for the Financial Report

The National Executive of the reporting unit is responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the RO Act, and for such internal control as the National Executive determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the National Executive is responsible for assessing the reporting unit's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the National Executive either intend to liquidate the Reporting Unit or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

Our objective is to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the reporting unit's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the National Executive.
- Conclude on the appropriateness of the National Executive's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the reporting unit's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the reporting unit to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the Reporting Unit to express an opinion on the financial report. We are responsible for the direction, supervision and performance of the Reporting Unit audit. We remain solely responsible for our audit opinion.

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF HEALTH SERVICES UNION NATIONAL OFFICE**

We communicate with the National Executive regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

I declare that I am an auditor, registered under the RO Act.

Report on Other Legal and Regulatory Requirements

In accordance with the requirements of section 257(7) of the RO Act, we are required to describe any deficiency, failure or shortcoming in respect of the matters referred to in section 252 and 257(2) of the RO Act.

Our opinion on the financial report is not modified in respect of section 252 and 257(2) of the RO Act because, in our opinion, it has been appropriately addressed by the reporting unit and is not considered material in the context of the audit of the financial report as a whole.

Hall Chadwick (NSW)

Hall Chadwick (NSW)
Level 40, 2 Park Street
Sydney NSW 2000

Stewart Thompson
Partner

21 August 2025

Registration Number: AA2017/160

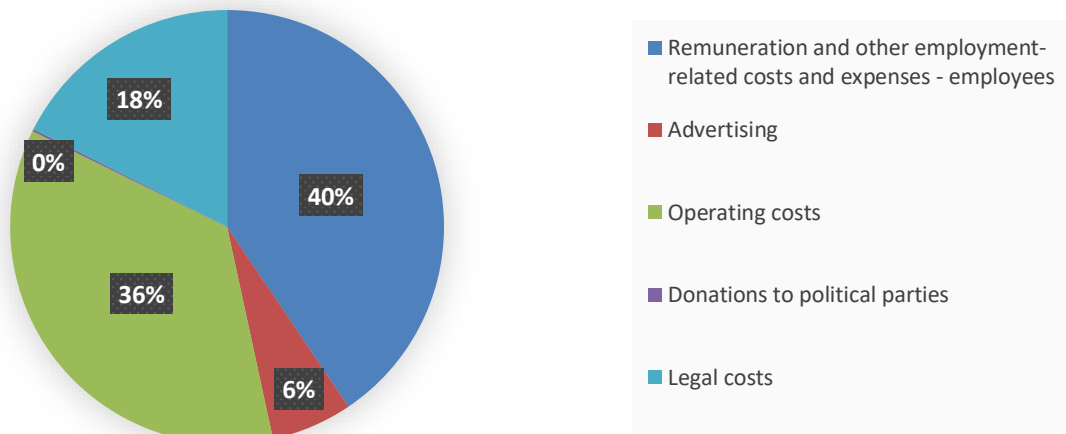
Health Services Union

Report required under subsection 255(2A)

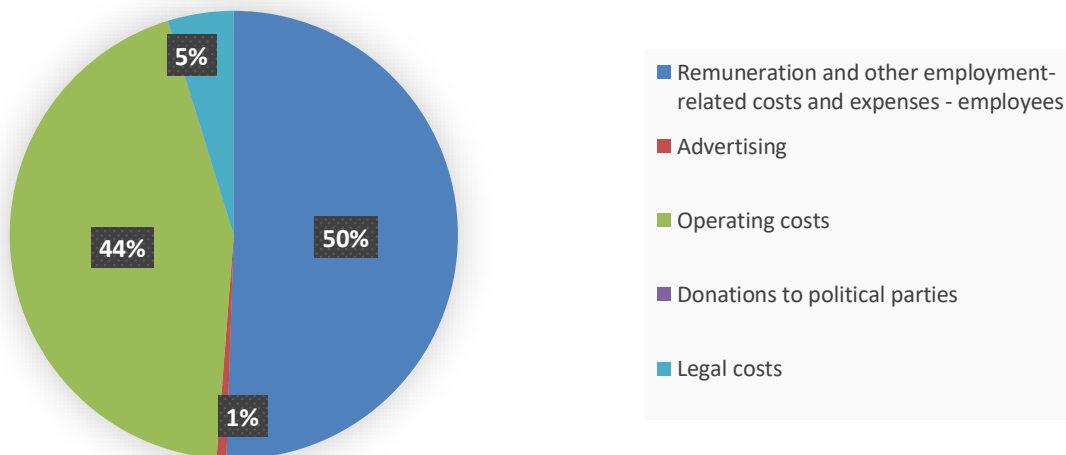
for the year ended 30 June 2025

The National Executive presents the expenditure report as required under subsection 255(2A) on the reporting unit for the year ended 30 June 2025.

2025 - Expenditure as required under s.255(2A) RO Act



2024 - Expenditure as required under s.255(2A) RO Act



Signature of designated officer:

Name and title of designated officer:

Lloyd Williams, National Secretary

Dated: 21 August 2025

Health Services Union

Operating report

for the year ended 30 June 2025

The National Executive presents its operating report on the reporting unit for the year ended 30 June 2025. The reporting unit incorporates the HSU National Office and the South Australia/ Northern Territory Branch.

Review of principal activities, the results of those activities and any significant changes in the nature of those activities during the year

The principal activity of the organisation during the year was that of a registered trade union. No significant change occurred in the nature of those activities during the year.

Significant changes in financial affairs

During the year the following significant changes in financial affairs occurred.

Significant Change

Membership subscriptions increased by 43%

Legal expenses increased by 491%

Other expenses to reporting units increased by 1520%

Employee expenses increased by 28%

Other expenses increased by 177%

Nature of Change

South Australia/Northern Territory Branch membership subscriptions increased during the year mainly due to higher member numbers.

Slater & Gordon were engaged for matters relating to the Fair Work Commission's investigation into the Victoria No. 1 Branch, including the s323 application which was successful and Victoria No. 1 Branch is now in full Administration as of 25th June 2025.

Other expenses to reporting units increased during the year largely due to costs incurred to reimburse the Victoria No. 1 Branch for the Interim Administrator salary costs before that Branch was put into full Administration on 25th June 2025.

Employee expenses increased due to more FTE than prior year (16.56 in FY25 vs 12.39 in FY24).

Other expenses increased during the year mainly driven by an increase in advertising/campaign costs, largely relating to the Federal Election campaign, and travel and accommodation due to the National Council Conference being held during the year ended 30th June 2025, no such conference was held in the prior year. This conference is now being held every second year rather than annually.

Right of members to resign

Subject to the rules of the organisation and Section 174 of the Fair Work (Registered Organisation) Act 2009, members have the rights to resign from membership of the organisation by written notice addressed to and delivered to the Secretary of the relevant Branch.

Officers or members who are superannuation fund trustee(s) (include position details) or director of a company that is a superannuation fund trustee where being a member or officer of a registered organisation is a criterion for them holding such position

Officer/Member	Trustee Company	Entity/Scheme	Period
Kate Marshall	H.E.S.T Australia Limited	HESTA Superfund	1/7/2024 to 30/6/2025

Number of members

The number of persons that were at the end of the financial year recorded in the register of members for Section 230 of Fair Work (Registered Organisation) Act 2009 and who were taken to be members of the registered organisation under Section 244 of the Fair Work (Registered Organisations) Act was 114,815 (2024: 111,611).

Branch	Number of Members
New South Wales/ACT/Queensland Branch	54,672
South Australia/Northern Territory Branch	3,279
Tasmania Branch	11,920
Victoria No. 1 Branch	13,018
Victoria No. 2 Branch	13,785
Victoria No. 3 Branch	6,472
Victoria No. 4 Branch	3,250
Western Australia Branch	8,419

Number of employees

The number of persons who were at the end of the financial year employees of the organisation including both full time and part-time employees on a full time equivalent was 16.56 (2024: 12.39).

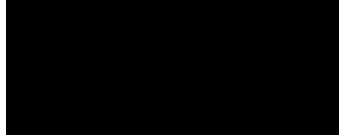
Names of National Executive members and period positions held during the financial year*

Officer	Position	Period
Lloyd Williams	National Secretary	1 July 2024 to 30 June 2025
Gerard Hayes	National President	1 July 2024 to 30 June 2025
Kate Marshall	National Assistant Secretary	1 July 2024 to 3 July 2024
Kate Marshall	National Senior Assistant Secretary	3 July 2024 to 30 June 2025
Diana Asmar	National Senior Vice President	1 July 2024 to 13 August 2024
Diana Asmar	National Executive Member	13 August 2024 to 25 June 2025
Naomi McCrae	National Vice President	1 July 2024 to 18 October 2024
Naomi McCrae	National Senior Vice President	18 October 2024 to 30 June 2025
Lynne Russell	National Vice President	1 July 2024 to 30 June 2025
Paul Healey	National Executive Member	1 July 2024 to 18 October 2024
Paul Healey	National Vice President	18 October 2024 to 30 June 2025
Robbie Moore	National Executive Member	1 July 2024 to 3 July 2024
Robbie Moore	National Assistant Secretary	3 July 2024 to 30 June 2025
Adrian Barrett	National Executive Member	1 July 2024 to 30 June 2025
David Eden	National Executive Member	1 July 2024 to 13 August 2024
Billy Elrick	National Executive Member	1 July 2024 to 30 June 2025
Matt Hammond	National Executive Member	1 July 2024 to 30 June 2025
Lauren Hutchins	National Executive Member	1 July 2024 to 30 June 2025
Craig McGregor	National Executive Member	1 July 2024 to 30 June 2025
Tammy Munroe	National Executive Member	3 July 2024 to 30 June 2025
Rebecca Sprekos	National Executive Member	29 July 2024 to 30 June 2025

Under r23B(a)(i) **Tenure of Office National Officers are elected by ballot of the National Council and take up the elected position at the end of the annual meeting of national council '...and shall take office from the completion of the annual meeting of National Council in the year of their election and shall hold office for a period of four years or until successors thereto*

have been elected and taken office.' The previous National Officers hold office until the conclusion of the annual meeting. Where a Branch Secretary is elected as a National Officer, there is a flow through effect to the members of National Executive. National Executive is made up of the National Officers and the Secretary of each Branch. A person cannot hold both roles on National Executive simultaneously.

Signature of designated officer:



Name and title of designated officer:

Lloyd Williams, National Secretary

Dated: 21 August 2025

National Executive statement

for the year ended 30 June 2025

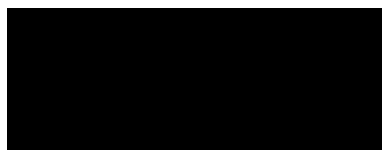
On the 21st August 2025 the National Executive of the Health Services Union passed the following resolution in relation to the general purpose financial report (GPFR) for the year ended 30 June 2025:

The National Executive declares that in its opinion:

- (a) the financial statements and notes comply with the Australian Accounting Standards;
- (b) the financial statements and notes comply with any other requirements imposed by the Reporting Guidelines or Part 3 of Chapter 8 of the *Fair Work (Registered Organisations) Act 2009* (the RO Act);
- (c) the financial statements and notes give a true and fair view of the financial performance, financial position and cash flows of the reporting unit for the financial year to which they relate;
- (d) there are reasonable grounds to believe that the reporting unit will be able to pay its debts as and when they become due and payable; and
- (e) during the financial year to which the GPFR relates and since the end of that year:
 - (i) meetings of the National Executive were held in accordance with the rules of the organisation including the rules of the National Union concerned; and
 - (ii) the financial affairs of the reporting unit have been managed in accordance with the rules of the organisation including the rules of a branch concerned; and
 - (iii) the financial records of the National Office have been kept and maintained in accordance with the RO Act; and
 - (iv) where the organisation consists of two or more reporting units, the financial records of the National Office have been kept, as far as practicable, in a consistent manner with each of the other reporting units of the organisation; and
 - (v) where information has been sought in any request by a member of the reporting unit or the General Manager duly made under section 272 of the RO Act, that information has been provided to the member or the General Manager; and
 - (vi) where any order for inspection of financial records has been made by the Fair Work Commission under section 273 of the RO Act, there has been compliance.

This declaration is made in accordance with a resolution of the National Executive.

Signature of designated officer:



Name and title of designated officer:

Lloyd Williams
National Secretary

Dated: 21 August 2025

Health Services Union

Statement of comprehensive income

for the year ended 30 June 2025

		2025	2024
	Notes	\$	\$
Revenue from contracts with customers			
Membership subscriptions	3	1,451,211	1,013,069
Capitation fees and other revenue from another reporting unit	3A	2,939,712	2,656,726
Other reimbursements	3E	26,255	7,560
Sponsorship income		50,000	-
Total revenue from contracts with customers		4,467,178	3,677,355
Income for furthering objectives			
Grants and/or donations	3D	-	-
Total income for furthering objectives		-	-
Other Income			
Investment income	3B	3,246	14,798
Net gains from sale of assets		7,101	-
Change in fair value of investments		50,778	-
Other income	3C	126,714	5,384
Total other income		187,839	20,182
Total income		4,655,017	3,697,537
Expenses			
Employee expenses	4A	(2,158,509)	(1,688,477)
Capitation fees and other expenses to another reporting unit	4B	(175,856)	(43,825)
Affiliation fees	4C	(713,857)	(683,281)
Administration expenses	4D	(518,503)	(378,964)
Grants or donations	4E	(9,091)	(10,000)
Depreciation and amortisation	4F	(125,924)	(88,472)
Finance costs	4G	(21,198)	(8,410)
Legal costs	4H	(896,415)	(151,780)
Write-down and impairment of assets	4I	(25,644)	-
Audit fees	12	(34,000)	(24,645)
Other expenses	4J	(576,368)	(208,111)
Total expenses		(5,255,365)	(3,285,965)
Surplus/(deficit) for the year		(600,348)	411,572
Other comprehensive income		-	-
Total comprehensive income/(loss) for the year		(600,348)	411,572

The above statement should be read in conjunction with the notes.

Health Services Union
Statement of financial position
as at 30 June 2025

		2025	2024
	Notes	\$	\$
ASSETS			
Current assets			
Cash and cash equivalents	5A	1,668,302	3,222,244
Trade and other receivables	5B	297,914	275,299
Other current assets	5C	18,838	19,735
Other financial assets	5D	1,050,778	-
Total current assets		3,035,832	3,517,278
Non-current assets			
Plant and equipment	6A	154,358	89,732
Buildings	6B	1,114,864	1,149,941
Right-of-use assets	6C	203,022	198,068
Total non-current assets		1,472,244	1,437,741
Total assets		4,508,076	4,955,019
LIABILITIES			
Current liabilities			
Trade payables	7A	160,321	144,937
Other payables	7B	175,230	167,602
Employee provisions	8A	408,032	340,067
Contract liabilities	5B	675,734	633,113
Lease liabilities	6C	47,111	32,236
Total current liabilities		1,466,428	1,317,955
Non-current liabilities			
Employee provisions	8A	26,169	12,587
Lease liabilities	6C	161,344	169,994
Total non-current liabilities		187,513	182,581
Total liabilities		1,653,941	1,500,536
Net assets		2,854,135	3,454,483
EQUITY			
General funds/retained earnings		2,854,135	3,454,483
Total equity		2,854,135	3,454,483

The above statement should be read in conjunction with the notes.

Health Services Union
Statement of changes in equity
for the year ended 30 June 2025

	General funds/ retained earnings	Total equity
	\$	\$
Balance as at 1 July 2023	3,042,911	3,042,911
Surplus for the year	411,572	411,572
Closing balance as at 30 June 2024	3,454,483	3,454,483
(Deficit) for the year	(600,348)	(600,348)
Closing balance as at 30 June 2025	2,854,135	2,854,135

The above statement should be read in conjunction with the notes.

Health Services Union
Statement of cash flows
for the year ended 30 June 2025

		2025	2024
	Notes	\$	\$
OPERATING ACTIVITIES			
Cash received			
Membership subscriptions – South Australia/Northern Territory Branch		1,596,333	1,114,375
Receipts from other reporting units	9B	3,258,843	2,899,678
Donations and grants		-	-
Interest		3,246	14,798
Other		181,393	77,644
Cash used			
Payments to employees		(1,964,812)	(1,572,267)
Payments to suppliers		(3,237,698)	(1,840,228)
Payments to other reporting units	9B	(205,668)	(46,333)
Interest payments and other finance costs		(21,198)	(8,410)
Net cash (used by)/from operating activities	9A	(389,561)	639,257
INVESTING ACTIVITIES			
Cash received			
Proceeds from sale of plant and equipment		8,636	-
Cash used			
Purchase of plant and equipment		(136,681)	(52,450)
Payment for investments		(1,000,000)	-
Net cash (used by) investing activities		(1,128,045)	(52,450)
FINANCING ACTIVITIES			
Cash used			
Repayment of lease liabilities		(36,336)	(15,218)
Net cash (used by) financing activities		(36,336)	(15,218)
Net (decrease)/increase in cash held			
Cash & cash equivalents at the beginning of the reporting period		3,222,244	2,650,655
Cash & cash equivalents at the end of the reporting period	5A	1,668,302	3,222,244

The above statement should be read in conjunction with the notes.

Index to the notes of the financial statements

Note 1	Material accounting policy information
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Note 4	Expenses
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Note 6	Non-current Assets
Note 7	Current Liabilities
Note 8	Provisions
Note 9	Cash Flow
Note 10	Contingent Liabilities, Assets and Commitments
Note 11	Related Party Disclosures
Note 12	Remuneration of Auditors
Note 13	Financial Instruments
Note 14	Fair value measurements
Note 15	Section 272 Fair Work (Registered Organisations) Act 2009

Note 1 Material accounting policy information

1.1 Basis of preparation of the financial statements

The financial statements are general purpose financial statements and have been prepared in accordance with Australian Accounting Standards and Interpretations issued by the Australian Accounting Standards Board (AASB) that apply for the reporting period and the *Fair Work (Registered Organisation) Act 2009* (RO Act). For the purpose of preparing the general purpose financial statements, the Health Services Union is a not-for-profit entity.

The financial statements, except for cash flow information, have been prepared using the accrual basis of accounting. The financial statements have been prepared on a historical cost basis as explained in the accounting policies below. Historical cost is generally based on the fair values of the consideration given in exchange for assets. The financial statements are presented in Australian dollars.

1.2 Going concern

The Health Services Union is not reliant on the agreed financial support of another reporting unit to continue on a going concern basis.

The Health Services Union has not agreed to provide financial support to another reporting unit to ensure they can continue on a going concern basis.

1.3 Comparative amounts

When required by accounting standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

1.4 Significant accounting judgements and estimates

There have not been any material accounting assumptions or estimates that have been identified that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

1.5 New Australian Accounting Standards

Adoption of New Australian Accounting Standards and amendments

The accounting policies adopted are consistent with those of the previous financial year except for the following amendments to accounting standards and other changes in accounting policy, which have been adopted for the first time this financial year:

- AASB 2020-1 *Amendments to Australian Accounting Standards* – Classification of Liabilities as Current or Non-Current
- AASB 2022-6 *Amendments to Australian Accounting Standards* – Non-Current Liabilities with Covenants
- AASB 2022-5 *Amendments to Australian Accounting Standards* – Lease Liability in a Sale and Leaseback

No accounting standard has been adopted earlier than the application date stated in the standard.

The amendments are not expected to have a material impact on the Health Services Union.

1.5 New Australian Accounting Standards (cont'd)

Future Australian Accounting Standards

New standards, amendments to standards or interpretations that were issued prior to the sign-off date and are applicable to future reporting periods that are expected to have a future financial impact on the Health Services Union include:

AASB 18 (NFP/super) Presentation and Disclosure in Financial Statements (Appendix D) [for not-for-profit and superannuation entities]

AASB 18 Presentation and Disclosure in Financial Statements has been issued to improve how entities communicate in their financial statements, with a particular focus on information about financial performance in the statement of profit or loss. The key presentation and disclosure requirements established by AASB 18 are:

- The presentation of newly defined subtotals in the statement of profit or loss
- The disclosure of management-defined performance measures (MPM)
- Enhanced requirements for grouping information (i.e., aggregation and disaggregation)

AASB 18 is accompanied with limited consequential amendments to the requirements in other accounting standards, including AASB 107 Statement of Cash Flows. AASB 18 introduces three new categories for classification of all income and expenses in the statement of profit or loss: operating, investing and financing. Additionally, entities will be required to present subtotals for 'operating profit or loss', 'profit or loss before financing and income taxes' and 'profit or loss'. For the purposes of classifying income and expenses into one of the three new categories, entities will need to assess their main business activity, which will require judgement. There may be more than one main business activity. AASB 18 also requires several disclosures in relation to MPMs, such as how the measure is calculated, how it provides useful information and a reconciliation to the most comparable subtotal specified by AASB 18 or another standard.

AASB 18 will replace AASB 101 Presentation of Financial Statements. This Standard applies to annual reporting periods beginning on or after 1 January 2028 for NFP entities. These amendments are applied retrospectively.

The adoption of this amendment is expected to have a material impact on the presentation and disclosure of items within the statement of profit or loss.

1.6 Current versus non-current classification

In accordance with AASB 101, the Health Services Union presents assets and liabilities in the statement of financial position based on current/non-current classification.

An asset is current when it is:

- expected to be realised or intended to be sold or consumed in the normal operating cycle;
- held primarily for the purpose of trading;
- expected to be realised within twelve months after the reporting period; or
- cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least twelve months after the reporting period

All other assets are classified as non-current.

1.6 Current versus non-current classification (cont'd)

A liability is current when:

- it is expected to be settled in the normal operating cycle;
- it is held primarily for the purpose of trading;
- it is due to be settled within twelve months after the reporting period; or
- there is no right at the end of the reporting period to defer the settlement of the liability for at least twelve months after the reporting period

The terms of the liability that could, at the option of the counterparty, result in its settlement by the issue of equity instruments do not affect its classification.

The Health Services Union classifies all other liabilities as non-current.

1.7 Revenue

The Health Services Union enters into various arrangements where it receives consideration from another party. These arrangements include consideration in the form of membership subscriptions, capitation fees, sponsorship income and grants.

The timing of recognition of these amounts as either revenue or income depends on the rights and obligations in those arrangements.

Revenue from contracts with customers

Where the Health Services Union has a contract with a customer, the Health Services Union recognises revenue when or as it transfers control of goods or services to the customer. The Health Services Union accounts for an arrangement as a contract with a customer if the following criteria are met:

- the arrangement is enforceable; and
- the arrangement contains promises (that are also known as performance obligations) to transfer goods or services to the customer (or to other parties on behalf of the customer) that are sufficiently specific so that it can be determined when the performance obligation has been satisfied.

Membership subscriptions

For membership subscription arrangements that meet the criteria to be contracts with customers, revenue is recognised when the promised goods or services transfer to the customer as a member of the Health Services Union.

If there is only one distinct membership service promised in the arrangement, the Health Services Union recognises revenue as the membership service is provided, which is typically based on the passage of time over the subscription period to reflect the Health Services Union's promise to stand ready to provide assistance and support to the member as required.

1.7 Revenue (cont'd)

If there is more than one distinct good or service promised in the membership subscription, the Health Services Union allocates the transaction price to each performance obligation based on the relative standalone selling price of each promised good or service. In performing this allocation, standalone selling prices are estimated if there is no observable evidence of the price that the Health Services Union charges for that good or service in a standalone sale. When a performance obligation is satisfied, which is either when the customer obtains control of the good (for example, books or clothing) or as the service transfers to the customer (for example, member services or training course), the Health Services Union recognises revenue at the amount of the transaction price that was allocated to that performance obligation.

For member subscriptions paid annually in advance, the Health Services Union has elected to apply the practical expedient to not adjust the transaction price for the effects of a significant financing component because the period from when the customer pays and the good or services will transfer to the customer will be one year or less.

When a member subsequently purchases additional goods or services from the Health Services Union at their standalone selling price, the Health Services Union accounts for those sales as a separate contract with a customer.

Capitation fees

Where the Health Services Union's arrangement with a branch or another reporting unit meets the criteria to be a contract with a customer, the Health Services Union recognises the capitation fees promised under that arrangement when or as it transfers the participation and voting rights on the national council.

In circumstances where the criteria for a contract with a customer are not met, the Health Services Union will recognise capitation fees as income upon receipt (as specified in the income recognition policy below).

Income of the Health Services Union as a Not-for-Profit Entity

Consideration is received by the Health Services Union to enable the entity to further its objectives. The Health Services Union recognises each of these amounts of consideration as income when the consideration is received (which is when the Health Services Union obtains control of the cash) because, based on the rights and obligations in each arrangement:

- the arrangements do not meet the criteria to be contracts with customers because either the arrangement is unenforceable or lacks sufficiently specific promises to transfer goods or services to the customer; and
- the Health Services Union's recognition of the cash contribution does not give rise to any related liabilities.

Gains from sale of assets

An item of property, plant and equipment is derecognised upon disposal (which is at the date the recipient obtains control) or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on derecognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is included in the statement of comprehensive income when the asset is derecognised.

Interest income

Interest revenue is recognised on an accrual basis using the effective interest method.

1.8 Employee benefits

A liability is recognised for benefits accruing to employees in respect of wages and salaries, annual leave, long service leave and termination benefits in the circumstances set up below.

Liabilities for short-term employee benefits (as defined in AASB 119 *Employee Benefits*) and termination benefits which are expected to be settled within twelve months of the end of reporting period are measured at their nominal amounts. The nominal amount is calculated with regard to the rates expected to be paid on settlement of the liability.

Other long-term employee benefits which are expected to be settled beyond twelve months are measured as the present value of the estimated future cash outflows to be made by the reporting unit in respect of services provided by employees up to reporting date.

Provision is made for separation and redundancy benefit payments. The Health Services Union recognises a provision for termination as part of a broader restructuring when it has developed a detailed formal plan for the terminations and has informed those employees affected that it will carry out the terminations. A provision for voluntary termination is recognised when the employee has accepted the offer of termination.

1.9 Leases

The Health Services Union assesses at contract inception whether a contract is, or contains, a lease. That is, if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

Health Services Union as a lessee

The Health Services Union applies a single recognition and measurement approach for all leases, except for short-term leases and leases of low-value assets. The Health Services Union recognises lease liabilities to make lease payments and right-of-use assets representing the right to use the underlying assets.

Right-of-use assets

The Health Services Union recognises right-of-use assets at the commencement date of the lease (i.e., the date the underlying asset is available for use). Right-of-use assets are measured at cost, less any accumulated depreciation and impairment losses, and adjusted for any remeasurement of lease liabilities. The cost of right-of-use assets includes the amount of lease liabilities recognised, initial direct costs incurred, and lease payments made at or before the commencement date less any lease incentives received. Right-of-use assets are depreciated on a straight-line basis over the shorter of the lease term and the estimated useful lives of the assets, as follows:

	2025	2024
Buildings	4-6 years	4-6 years
Plant and equipment	4-5 years	4-5 years

If ownership of the leased asset transfers to the Health Services Union at the end of the lease term or the cost reflects the exercise of a purchase option, depreciation is calculated using the estimated useful life of the asset. The right-of-use assets are also subject to impairment.

1.9 Leases (cont'd)

Lease liabilities

At the commencement date of the lease, the Health Services Union recognises lease liabilities measured at the present value of lease payments to be made over the lease term. The lease payments include fixed payments (including in-substance fixed payments) less any lease incentives receivable, variable lease payments that depend on an index or a rate, and amounts expected to be paid under residual value guarantees. The lease payments also include the exercise price of a purchase option reasonably certain to be exercised by the Health Services Union and payments of penalties for terminating the lease if the lease term reflects the Health Services Union exercising the option to terminate. Variable lease payments that do not depend on an index or a rate are recognised as expenses (unless they are incurred to produce inventories) in the period in which the event or condition that triggers the payment occurs.

In calculating the present value of lease payments, the Health Services Union uses the incremental borrowing rate. After the commencement date, the amount of lease liabilities is increased to reflect the accretion of interest and reduced for the lease payments made. In addition, the carrying amount of lease liabilities is remeasured if there is a modification, a change in the lease term, a change in the lease payments (e.g., changes to future payments resulting from a change in an index or rate used to determine such lease payments) or a change in the assessment of an option to purchase the underlying asset.

Short-term leases and leases of low-value assets

Lease payments on short-term leases and leases of low-value assets are recognised as an expense on a straight-line basis over the lease term. The Health Services Union's short-term leases are those that have a lease term of 12 months or less from commencement and its leases of low-value assets relates to leases that are below \$5,000.

1.10 Borrowing costs

All borrowing costs are recognised in profit and loss in the period in which they are incurred.

1.11 Cash

Cash is recognised at its nominal amount. Cash and cash equivalents includes cash on hand, deposits held at call with bank, other short-term highly liquid investments with original maturity of 3 months or less that are readily convertible to known amounts of cash and subject to insignificant risk of changes in value and bank overdrafts. Bank overdrafts are shown within short-term borrowings in current liabilities on the statement of financial position.

1.12 Financial instruments

Financial assets and financial liabilities are recognised when the Health Services Union becomes a party to the contractual provisions of the instrument.

1.13 Financial assets

Contract assets and receivables

A contract asset is recognised when the Health Services Union's right to consideration in exchange goods or services that has transferred to the customer when that right is conditioned on the Health Services Union's future performance or some other condition.

A receivable is recognised if an amount of consideration that is unconditional is due from the customer (i.e., only the passage of time is required before payment of the consideration is due).

Initial recognition and measurement

The Health Services Union's financial assets include trade receivables and investments managed on behalf of the Health Services Union by Partnervest.

Financial assets are classified, at initial recognition, and subsequently measured at amortised cost, fair value through other comprehensive income, or fair value through profit or loss.

The classification of financial assets at initial recognition depends on the financial asset's contractual cash flow characteristics and the Health Services Union's business model for managing them. With the exception of trade receivables that do not contain a significant financing component, the Health Services Union initially measures a financial asset at its fair value plus, in the case of a financial asset not at fair value through profit or loss, transaction costs.

In order for a financial asset to be classified and measured at amortised cost or fair value through other comprehensive income, it needs to give rise to cash flows that are 'solely payments of principal and interest' (**SPPI**) on the principal amount outstanding. This assessment is referred to as the SPPI test and is performed at an instrument level.

The Health Services Union's business model for managing financial assets refers to how it manages its financial assets in order to generate cash flows. The business model determines whether cash flows will result from collecting contractual cash flows, selling the financial assets, or both.

Purchases or sales of financial assets that require delivery of assets within a time frame established by regulation or convention in the market place (regular way trades) are recognised on the trade date, i.e. the date that the Health Services Union commits to purchase or sell the asset.

Subsequent measurement

For purposes of subsequent measurement, financial assets are classified into three categories:

- Financial assets at amortised cost
- Financial assets at fair value through profit or loss
- Financial assets designated at fair value through profit or loss

Financial assets at amortised cost

The Health Services Union measures financial assets at amortised cost if both of the following conditions are met:

- The financial asset is held within a business model with the objective to hold financial assets in order to collect contractual cash flows; and
- The contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

1.13 Financial assets (cont'd)

Financial assets at amortised cost are subsequently measured using the effective interest rate (**EIR**) method and are subject to impairment. Gains and losses are recognised in profit or loss when the asset is derecognised, modified or impaired.

The Health Services Union's financial assets at amortised cost include trade receivables.

Financial assets at fair value through profit or loss (including designated)

Financial assets at fair value through profit or loss include financial assets held for trading, financial assets designated upon initial recognition at fair value through profit or loss, or financial assets mandatorily required to be measured at fair value. Financial assets are classified as held for trading if they are acquired for the purpose of selling or repurchasing in the near term. Financial assets with cash flows that are not solely payments of principal and interest are classified as measured at fair value through profit or loss, irrespective of the business model. Notwithstanding the criteria for debt instruments to be classified at amortised cost or at fair value through other comprehensive income, as described above, debt instruments may be designated at fair value through profit or loss on initial recognition if doing so eliminates, or significantly reduces, an accounting mismatch.

Financial assets at fair value through profit or loss are carried in the statement of financial position at fair value with net changes in fair value recognised in profit or loss.

Derecognition

A financial asset is derecognised when:

- The rights to receive cash flows from the asset have expired; or
- The Health Services Union has transferred its rights to receive cash flows from the asset or has assumed an obligation to pay the received cash flows in full without material delay to a third party under a 'pass-through' arrangement; and either:
 - The Health Services Union has transferred substantially all the risks and rewards of the asset; or
 - The Health Services Union has neither transferred nor retained substantially all the risks and rewards of the asset but has transferred control of the asset.

When the Health Services Union has transferred its rights to receive cash flows from an asset or has entered into a pass-through arrangement, it evaluates if, and to what extent, it has retained the risks and rewards of ownership.

When it has neither transferred nor retained substantially all of the risks and rewards of the asset, nor transferred control of the asset, the Health Services Union continues to recognise the transferred asset to the extent of its continuing involvement together with associated liability.

Offsetting

Financial assets and financial liabilities are offset and the net amount is reported in the statement of financial position if the Health Services Union currently has a legally enforceable right to offset the recognised amounts and there is an intention to settle on a net basis or realise the assets and settle the liabilities simultaneously.

1.13 Financial assets (cont'd)

Impairment

Expected credit losses (ECLs)

(i) Debt instruments other than trade receivables

The Health Services Union recognises an allowance for ECLs for all contract assets, receivables and any other financial assets measured at amortised cost. ECLs are based on the difference between the contractual cash flows due in accordance with the contract and all the cash flows that the Health Services Union expects to receive, discounted at an approximation of the original effective interest rate. The expected cash flows will include cash flows from the sale of collateral held or other enhancements that are integral to the contractual terms.

A financial asset is written off when there is no reasonable expectation of recovering the contractual cash flows.

(ii) Trade receivables and contract assets

For trade receivables that do not have a significant financing component, the Health Services Union applies a simplified approach in calculating ECLs. Therefore, the Health Services Union does not track changes in credit risk, but instead recognises a loss allowance based on lifetime ECL's at each reporting date. The Health Services Union has established a provision matrix that is based on its historical credit loss experience, adjusted for forward-looking factors specific to the debtors and the economic environment. Historically, all HSU branches have paid their capitation/ACTU affiliation fees and the Health Services Union expects this trend to continue and has therefore not recognised any loss allowance.

1.14 Financial Liabilities

Initial recognition and measurement

The Health Services Union's financial liabilities include trade and other payables.

The Health Services Union's financial liabilities are classified as financial liabilities subsequently measured at amortised cost.

These financial liabilities are recognised initially at fair value and net of directly attributable transaction costs.

Subsequent measurement

Financial liabilities at amortised cost

After initial recognition, trade payables and interest-bearing loans and borrowings are subsequently measured at amortised cost using the EIR method. Gains and losses are recognised in profit or loss when the liabilities are derecognised as well as through the EIR amortisation process.

1.14 Financial Liabilities (cont'd)

Amortised cost is calculated by taking into account any discount or premium on acquisition and fees or costs that are an integral part of the EIR. The EIR amortisation is included as finance costs in profit or loss.

Derecognition

A financial liability is derecognised when the obligation under the liability is discharged or cancelled or expires. When an existing financial liability is replaced by another from the same lender on substantially different terms, or the terms of an existing liability are substantially modified, such an exchange or modification is treated as the derecognition of the original liability and the recognition of a new liability. The difference in the respective carrying amounts is recognised in profit or loss.

1.15 Liabilities relating to contracts with customers

Contract liabilities

A contract liability is recognised if a payment is received or a payment is due (whichever is earlier) from a customer before the Health Services Union transfers the related goods or services. Contract liabilities include deferred income. Contract liabilities are recognised as revenue when the Health Services Union performs under the contract (i.e., transfers control of the related goods or services to the customer).

Refund liabilities

A refund liability is recognised for the obligation to refund some or all of the consideration received (or receivable) from a customer. The Health Services Union refund liabilities arise from customers' right of return. The liability is measured at the amount the Health Services Union ultimately expects it will have to return to the customer. The Health Services Union updates its estimates of refund liabilities (and the corresponding change in the transaction price) at the end of each reporting period.

1.16 Contingent liabilities and contingent assets

Contingent liabilities and contingent assets are not recognised in the statement of financial position but are reported in the relevant notes. They may arise from uncertainty as to the existence of a liability or asset or represent an existing liability or asset in respect of which the amount cannot be reliably measured. Contingent assets are disclosed when settlement is probable but not virtually certain, and contingent liabilities are disclosed when settlement is greater than remote.

1.17 Land, buildings, plant and equipment

Asset recognition threshold

Purchases of land, buildings, plant and equipment are recognised initially at cost in the statement of financial position. The initial cost of an asset includes an estimate of the cost of dismantling and removing the item and restoring the site on which it is located.

Land and buildings

Land and buildings are measured at cost less accumulated depreciation and impairment losses.

1.17 Land, buildings, plant and equipment (cont'd)

Depreciation

Depreciable property, plant and equipment assets are written-off to their estimated residual values over their estimated useful life using, in all cases, the straight line method of depreciation. Depreciation rates (useful lives), residual values and methods are reviewed at each reporting date and necessary adjustments are recognised in the current, or current and future reporting periods, as appropriate.

Depreciation rates applying to each class of depreciable asset are based on the following useful lives:

	2025	2024
Plant and equipment	2.5 to 10 years	2.5 to 10 years
Buildings	40 years	40 years

Derecognition

An item of land, buildings, plant and equipment is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on the disposal or retirement of an item of property, plant and equipment is determined as the difference between the sales proceeds and the carrying amount of the asset and is recognised in the profit and loss.

1.18 Impairment for non-financial assets

All assets are assessed for impairment at the end of each reporting period to the extent that there is an impairment trigger. Where indications of impairment exist, the asset's recoverable amount is estimated and an impairment adjustment made if the asset's recoverable amount is less than its carrying amount.

The recoverable amount of an asset is the higher of its fair value less costs of disposal and its value in use. Value in use is the present value of the future cash flows expected to be derived from the asset. Where the future economic benefit of an asset is not primarily dependent on the asset's ability to generate future cash flows, and the asset would be replaced if the Health Services Union were deprived of the asset, its recoverable amount is its fair value.

In other cases, for the purposes of determining recoverable amount, assets are grouped at the lowest levels for which there are separately identifiable cash flows which are largely independent of the cash inflows from other assets or groups of assets (cash generating units). Non-financial assets that suffered impairment are reviewed for possible reversal of the impairment at each reporting date.

1.19 Taxation

The Health Services Union is exempt from income tax under section 50.1 of the *Income Tax Assessment Act 1997* however still has obligation for Fringe Benefits Tax (FBT) and the Goods and Services Tax (GST).

Revenues, expenses and assets are recognised net of GST except:

- where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO); and
- for receivables and payables.

The net amount of GST recoverable from, or payable to, the taxation authority is included as part of receivables or payables.

1.19 Taxation (cont'd)

Cash flows are included in the statement of cash flows on a gross basis. The GST component of cash flows arising from investing and financing activities which is recoverable from, or payable to, the ATO is classified within operating cash flows.

1.20 Fair value measurement

The Health Services Union measures managed investments at fair value at each balance sheet date.

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The fair value measurement is based on the presumption that the transaction to sell the asset or transfer the liability takes place either:

- in the principal market for the asset or liability; or
- in the absence of a principal market, in the most advantageous market for the asset or liability.

The principal or the most advantageous market must be accessible by the Health Services Union. The fair value of an asset or a liability is measured using the assumptions that market participants would use when pricing the asset or liability, assuming that market participants act in their economic best interest.

A fair value measurement of a non-financial asset takes into account the current use of the non-financial asset which is consistent with the market participant's ability to generate economic benefits by using the asset in its highest and best use or by selling it to another market participant that would use the asset in its highest and best use.

All assets and liabilities for which fair value is measured or disclosed in the financial statements are categorised within the fair value hierarchy, described as follows, based on the lowest level input that is significant to the fair value measurement as a whole:

- Level 1 – Quoted market prices in active markets for identical assets or liabilities
- Level 2 – Valuation techniques for which the lowest level input that is significant to the fair value measurement is directly or indirectly observable
- Level 3 – Valuation techniques for which the lowest level input that is significant to the fair value measurement is unobservable.

For assets and liabilities that are recognised in the financial statements on a recurring basis, the Health Services Union determines whether transfers have occurred between levels in the hierarchy by re-assessing categorisation (based on the lowest level input that is significant to the fair value measurement as a whole) at the end of each reporting period.

Note 2 Events after the reporting period

There has not been any matter or circumstance occurring subsequent to the end of the financial year that has significantly affected, or may significantly affect, the operations of the Health Services Union, the results of those operations, or the state of affairs of the Health Services Union in subsequent financial periods.

Note 3 Revenue and income**Disaggregation of revenue from contracts with customers**

A disaggregation of the Health Services Union's revenue by type of arrangement is provided on the face of the Statement of Comprehensive Income. The table below also sets out a disaggregation of revenue by type of customer:

	2025	2024
	\$	\$
<i>Type of customer</i>		
Members – South Australia/Northern Territory Branch	1,451,211	1,013,069
Other reporting units	2,939,712	2,656,726
Other parties	26,255	7,560
Total revenue from contracts with customers	<u>4,417,178</u>	<u>3,677,355</u>

Disaggregation of income for furthering activities

A disaggregation of the Health Services Union's income by type of arrangement is provided on the face of the Statement of Comprehensive Income. The table below also sets out a disaggregation of income by funding source:

Income funding sources

Other parties	-	-
Total income for furthering activities	<u>-</u>	<u>-</u>

Note 3A: Capitation fees and other revenue from another reporting unit

	2025	2024
	\$	\$
Capitation fees:		
New South Wales/ACT/Queensland Branch	1,021,603	935,485
South Australia/Northern Territory Branch	42,937	35,618
Tasmania Branch	220,662	201,450
Victoria No. 1 Branch	370,677	327,659
Victoria No. 2 Branch	236,255	218,222
Victoria No. 3 Branch	120,293	114,031
Victoria No. 4 Branch	61,498	57,574
Western Australia Branch	153,369	138,122
Subtotal capitation fees	<u>2,227,294</u>	<u>2,028,161</u>

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Notes of the Financial Statements for the year ended 30 June 2025

Note 3A: Capitation fees and other revenue from another reporting unit (cont'd)

	2025	2024
	\$	\$
Other revenue from another reporting unit:		
New South Wales/ACT/Queensland Branch	332,691	294,487
South Australia/Northern Territory Branch	16,747	13,883
Tasmania Branch	79,587	56,446
Victoria No. 1 Branch	87,879	100,733
Victoria No. 2 Branch	89,264	67,606
Victoria No. 3 Branch	39,443	36,451
Victoria No. 4 Branch	19,033	16,701
Western Australia Branch	47,774	42,258
Subtotal other revenue from another reporting unit	712,418	628,565
Total capitation fees and other revenue from another reporting unit	2,939,712	2,656,726

Note 3B: Investment income

Interest:		
Deposits	3,246	14,798
Total investment income	3,246	14,798

Note 3C: Other income

Director's Fees	88,845	1,966
Gain on lease termination	8,364	-
Insurance claim receipt	25,386	-
Employee FBT contributions	4,109	3,418
Other	10	-
Total other income	126,714	5,384

In accordance with the union's policy, all director's fees earned by any officers/employees who are directors of a company or trustee of a superannuation scheme due to their positions of the Health Services Union, are paid directly to the Health Services Union with any related superannuation paid to the officers superannuation fund.

Note 3D: Grants and/or donations

Grants	-	-
Donations	-	-
Total grants and donations	-	-

Note 3E: Other reimbursements

Reimbursements from related parties (state-registered associations) – refer to note 11A	26,255	7,510
Other reimbursements	-	50
Total other reimbursements	26,255	7,560

Note 4 Expenses

Note 4A: Employee expenses

	2025	2024
	\$	\$
Holders of office:		
Wages and salaries	485,626	366,336
Superannuation	55,873	40,297
Leave and other entitlements	22,471	(18,842)
Payroll tax	27,392	22,938
Separation and redundancies	-	-
Other employee expenses	-	-
Subtotal employee expenses holders of office	591,362	410,729
Employees other than office holders:		
Wages and salaries	1,316,372	1,043,033
Superannuation	157,763	119,952
Leave and other entitlements	23,696	52,703
Payroll tax	69,316	62,060
Separation and redundancies	-	-
Other employee expenses	-	-
Subtotal employee expenses employees other than office holders	1,567,147	1,277,748
Total employee expenses	2,158,509	1,688,477

Note 4B: Capitation fees and other expenses to another reporting unit

Capitation fees

Capitation fees – South Australia/Northern Territory Branch	42,937	35,618
Subtotal capitation fees	42,937	35,618

Other expenses to another reporting unit

Tasmania Branch – travel expenses	3,720	5,080
Victoria No. 1 Branch – interim administrator	127,885	-
Victoria No. 2 Branch – staff amenities	-	733
Victoria No. 2 Branch – travel expenses	463	1,827
Victoria No. 3 Branch – travel expenses	851	567
Subtotal other expenses to another reporting unit	132,919	8,207
Total capitation fees and other expenses to another reporting unit	175,856	43,825

Capitation fees relate to the capitation fees the National Office has charged the South Australia/Northern Territory Branch and these are included in capitation fee revenue at note 3A Capitation fees and other revenue from another reporting unit. Given the South Australia/Northern Territory Branch forms part of the National Office Reporting Unit, no capitation fees were paid to another reporting unit.

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 4C: Affiliation fees

	2025	2024
	\$	\$
ACTU Affiliation fees	678,760	656,853
ALP Affiliation fees – South Australia/Northern Territory Branch	12,548	9,587
National Aged Care Alliance	2,738	4,817
Climate and Health Alliance Affiliation fees	2,000	2,000
Union Aid Abroad APHEDA Affiliation fees	1,881	1,344
SA May Day Collective	500	500
SA Unions Affiliation fees	15,430	8,180
Total affiliation fees/subscriptions	713,857	683,281

Note 4D: Administration expenses

	2025	2024
	\$	\$
Conference and meeting expenses	23,304	11,945
Staff & visitor amenities	9,162	7,121
Computer expenses	122,515	90,435
Electricity	6,001	6,802
Insurance	62,972	52,068
Car rental	94	-
Campaign expenses	32,385	43,123
Bank fees	17,390	12,029
Staff training	15,361	14,864
Office expenses	68,101	62,594
Contractors/consultants	154,621	55,082
Recruitment expenses	1,305	1,365
Website costs	5,292	11,232
Subtotal administration expenses	518,503	368,660

Lease rentals:

Short term, low value and variable lease payments	-	10,304
Total administration expenses	518,503	378,964

Note 4E: Grants or donations

Grants:

Total expensed that were \$1,000 or less	-	-
Total expensed that exceeded \$1,000	-	-

Donations:

Total expensed that were \$1,000 or less	-	-
Total expensed that exceeded \$1,000	9,091	10,000
Total grants or donations	9,091	10,000

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 4F: Depreciation and amortisation

	2025	2024
	\$	\$
Depreciation:		
Plant and equipment	44,876	34,407
Buildings	35,077	35,077
Right-of-use assets	45,971	18,988
Total depreciation	125,924	88,472

Note 4G: Finance costs

Interest expense on lease liabilities	21,198	8,410
Total finance costs	21,198	8,410

Note 4H: Legal costs

	2025	2024
	\$	\$
Litigation	769,456	-
Industrial legal	113,923	103,484
Other legal costs	13,036	48,296
Total legal costs	896,415	151,780

Note 4I: Write-down and impairment of assets

Asset write-downs and impairments of:		
Plant and equipment	25,644	-
Total write-down and impairment of assets	25,644	-

Note 4J: Other expenses

Advertising	309,783	22,439
Fringe benefits tax	17,275	9,357
Workcover	34,483	34,826
Motor vehicle expense	20,571	16,083
Travel and accommodation	194,256	125,406
Total other expenses	576,368	208,111

Note 5 Current Assets

Note 5A: Cash and cash equivalents

Cash at bank	1,608,302	3,162,244
Short term deposits	60,000	60,000
Total cash and cash equivalents	1,668,302	3,222,244

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 5B: Trade and other receivables

Receivables from other reporting units	2025	2024
	\$	\$
Victoria No. 1 Branch	54,488	59,254
Victoria No. 2 Branch	87,372	78,014
Victoria No. 4 Branch	22,743	20,470
Western Australia Branch	56,720	49,716
Total receivables from other reporting units	221,323	207,454
Less allowance for expected credit losses	-	-
Total allowance for expected credit losses	-	-
Receivable from other reporting units (net)	221,323	207,454
	2025	2024
	\$	\$
Other receivables:		
Other	76,591	67,845
Total other receivables	76,591	67,845
Total trade and other receivables (net)	297,914	275,299

The Health Services Union has recognised the following assets and liabilities related to contracts with customers:

Receivables	221,323	207,454
Receivables - current	221,323	207,454
Receivables - non-current	-	-
Other Contract liabilities	675,734	633,113
Contract liabilities - current	675,734	633,113
Contract liabilities - non-current	-	-

Revenue recognised in the reporting period that was included in the contract liability balance at the beginning of the period was \$633,113.

Included in the above total are the following contract liabilities to other reporting units:

Contract liabilities to other reporting units	673,734	607,113
New South Wales/ACT/Queensland Branch	343,466	308,202
South Australia/Northern Territory Branch	14,435	10,816
Tasmania Branch	74,187	64,003
Victoria No. 1 Branch	49,535	52,293
Victoria No. 2 Branch	79,429	70,922
Victoria No. 3 Branch	40,443	37,071
Victoria No. 4 Branch	20,676	18,609
Western Australia Branch	51,563	45,197

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 5C: Other current assets

	2025	2024
	\$	\$
Prepayments	18,838	19,735
Total other current assets	18,838	19,735

Note 5D: Other financial assets

Managed investments	1,050,778	-
Total other financial assets	1,050,778	-

Note 6 Non-current Assets

Note 6A: Plant and equipment

	2025	2024
	\$	\$
Plant and equipment:		
at cost	354,921	264,155
accumulated depreciation	(200,563)	(174,423)
Total plant and equipment	154,358	89,732

Note 6B: Buildings

Buildings:		
at cost	1,403,070	1,403,070
accumulated depreciation	(288,206)	(253,129)
Total buildings	1,114,864	1,149,941

The Health Services Union engaged an external, independent and qualified valuer to determine the fair value of the Health Services Union's buildings as at 16th May 2024. The fair value was assessed as \$1,475,000. The National Executive has opted not to revalue the property and remain on the "cost" model in accordance with its current accounting policy.

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 6B: Buildings (cont'd)

Reconciliation of opening and closing balances of buildings, plant and equipment

	Plant and Equipment \$	Buildings \$	Total \$
As at 1 July 2024			
Gross book value	264,155	1,403,070	1,667,225
Accumulated depreciation and impairment	(174,423)	(253,129)	(427,552)
Net book value 1 July 2024	89,732	1,149,941	1,239,673
Additions:			
By purchase	136,681	-	136,681
Impairments	(25,644)	-	(25,644)
Depreciation expense	(44,876)	(35,077)	(79,953)
Disposals:			
Other	(1,535)	-	(1,535)
Net book value 30 June 2025	154,358	1,114,864	1,269,222
Net book value as of 30 June 2025 represented by:			
Gross book value	354,921	1,403,070	1,757,991
Accumulated depreciation and impairment	(200,563)	(288,206)	(488,769)
Net book value 30 June 2025	154,358	1,114,864	1,269,222

	Plant and Equipment \$	Buildings \$	Total \$
As at 1 July 2023			
Gross book value	211,705	1,403,070	1,614,775
Accumulated depreciation and impairment	(140,016)	(218,052)	(358,068)
Net book value 1 July 2023	71,689	1,185,018	1,256,707
Additions:			
By purchase	52,450	-	52,450
Impairments	-	-	-
Depreciation expense	(34,407)	(35,077)	(69,484)
Disposals:			
Other	-	-	-
Net book value 30 June 2024	89,732	1,149,941	1,239,673
Net book value as of 30 June 2024 represented by:			
Gross book value	264,155	1,403,070	1,667,225
Accumulated depreciation and impairment	(174,423)	(253,129)	(427,552)
Net book value 30 June 2024	89,732	1,149,941	1,239,673

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 6C: Leases

Health Services Union as a lessee

Set out below are the carrying amounts of right-of-use assets recognised and the movements during the period:

	Photocopier	Office Space	Total
	\$	\$	\$
As at 1 July 2023	3,334	-	3,334
Additions	20,868	192,854	213,722
Depreciation expense	(4,377)	(14,611)	(18,988)
As at 1 July 2024	19,825	178,243	198,068
Additions	19,101	189,613	208,714
Disposals - terminations	-	(157,789)	(157,789)
Depreciation expense	(5,766)	(40,205)	(45,971)
As at 30 June 2025	33,160	169,862	203,022

Set out below are the carrying amounts of lease liabilities and the movements during the period:

	2025	2024
	\$	\$
As at 1 July	202,230	3,726
Additions	208,714	213,722
Disposals - terminations	(166,153)	-
Accretion of interest	21,198	8,410
Payments	(57,534)	(23,628)
As at 30 June	208,455	202,230
Current	47,111	32,236
Non-current	161,344	169,994

The maturity analysis of lease liabilities is disclosed in Note 13E Liquidity risk.

	2025	2024
	\$	\$
The following are the amounts recognised in profit or loss:		
Depreciation expense of right-of-use assets	45,971	18,988
Interest expense on lease liabilities	21,198	8,410
Expense relating to short-term leases	-	10,304
Total amount recognised in profit or loss	67,169	37,702

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 6C: Leases (cont'd)

Set out below are the undiscounted potential future rental payments relating to periods following the exercise date of extension that are not included in the lease term:

	Within five years	More than five years	Total
	\$	\$	\$
2025			
Extension options expected not to be exercised	90,210	37,989	128,199
	90,210	37,989	128,199
2024			
Extension options expected not to be exercised	-	-	-
	-	-	-

Note 7 Current Liabilities

Note 7A: Trade payables

	2025	2024
	\$	\$
Trade creditors and accruals	72,351	50,555
Subtotal trade creditors	72,351	50,555

Payables to other reporting units

Tasmania Branch	15,379	27,272
Victoria No.1 Branch	40,482	24,288
Victoria No.2 Branch	21,216	28,833
Victoria No.3 Branch	10,893	13,989
Subtotal payables to other reporting units	87,970	94,382
Total trade payables	160,321	144,937

Settlement is usually made within 30 days.

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 7B: Other payables

	2025	2024
	\$	\$
Superannuation	10,511	6,998
PAYG Withholding Tax	40,151	29,366
GST payable	44,549	78,624
FBT payable	7,919	-
Legal costs		
Litigation	-	-
Other legal costs	72,100	52,614
Total other payables	175,230	167,602

Total other payables are expected to be settled in:

No more than 12 months	175,230	167,602
Total other payables	175,230	167,602

Note 8 Provisions

Note 8A: Employee provisions

	2025	2024
	\$	\$
Office holders:		
Annual leave and ADO	75,996	45,259
Long service leave	125,265	98,152
Subtotal employee provisions—office holders	201,261	143,411
Employees other than office holders:		
Annual leave and ADO	152,946	154,848
Long service leave	79,994	54,395
Subtotal employee provisions—employees other than office holders	232,940	209,243
Total employee provisions	434,201	352,654
Current	408,032	340,067
Non-current	26,169	12,587
Total employee provisions	434,201	352,654

Note 9 Cash Flow

Note 9A: Cash flow reconciliation

	2025 \$	2024 \$
Reconciliation of cash and cash equivalents as per statement of financial position to statement of cash flows:		
Cash and cash equivalents as per:		
Statement of cash flows	1,668,302	3,222,244
Statement of financial position	1,668,302	3,222,244
Difference	<u>-</u>	<u>-</u>
Reconciliation of surplus/(deficit) to net cash from operating activities:		
Surplus/(deficit) for the year	(600,348)	411,572
Adjustments for non-cash items		
Depreciation	125,924	88,472
Net write-down of non-financial assets	25,644	-
Net gains from sale of assets	(7,101)	-
Change in fair value of investments	(50,778)	-
Gain on lease termination	(8,364)	-
Changes in assets/liabilities		
(Increase) in trade and other receivables	(22,615)	(8,610)
Decrease in prepayments	897	950
Increase in trade and other payables	23,012	100,867
Increase in employee provisions	81,547	33,859
Increase in contract liabilities	42,621	12,147
Net cash from operating activities	<u>(389,561)</u>	<u>639,257</u>

Note 9B: Cash flow information

Cash inflows		
New South Wales/ACT/Queensland Branch	1,528,512	1,358,007
Tasmania Branch	341,476	287,818
Victoria No. 1 Branch	506,144	453,013
Victoria No. 2 Branch	393,451	314,411
Victoria No. 3 Branch	179,417	206,309
Victoria No. 4 Branch	88,585	81,703
Western Australia Branch	221,258	198,417
Total cash inflows	<u>3,258,843</u>	<u>2,899,678</u>

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 9B: Cash flow information (cont'd)

Cash outflows

	2025	2024
	\$	\$
Tasmania Branch	31,344	15,690
Victoria No. 1 Branch	130,057	-
Victoria No. 2 Branch	29,342	19,695
Victoria No. 3 Branch	14,925	10,948
Total cash outflows	205,668	46,333

Note 10 Contingent Liabilities, Assets and Commitments

Note 10A: Commitments and contingencies

Contingent assets

At 30 June 2025 the Health Services Union has contingent assets of \$Nil (2024: \$Nil).

Capital commitments

At 30 June 2025 the Health Services Union has capital commitments of \$Nil (2024: \$Nil).

Note 11 Related Party Disclosures

Note 11A: Related party transactions for the reporting period

The following table provides the total amount of transactions that have been entered into with related parties for the relevant year. Please also refer to notes 3A Capitation fees and other revenue from another reporting unit, 4B Capitation fees and other expenses to another reporting unit, 5B Trade and other receivables, 7A Trade payables, and 9B Cash flow information where transactions and balances with Branches have been disclosed.

Date	Name	Nature of relationship	Purpose of expense payment	2025 \$	2024 \$
1/7/2024 – 30/6/2025	Health Services Union NSW (State Registered Union)	State-registered association	Reimbursement of National Office travel expenses paid for by State Union	13,869	6,978
1/7/2024 – 30/6/2025	HSU WA (State Registered Union)	State-registered association	Reimbursement of National Office travel expenses paid for by State Union	11,797	6,342
1/7/2024 – 30/6/2025	Medical Scientists Association of Victoria (MSAV)	State-registered association	Reimbursement of National Office travel expenses paid for by MSAV	726	-

Health Services Union

Notes of the Financial Statements for the year ended 30 June 2025

Note 11A: Related party transactions for the reporting period (cont'd)

Date	Name	Nature of relationship	Purpose of revenue receipt	2025 \$	2024 \$
1/7/2024 – 30/6/2025	Health Services Union NSW (State Registered Union)	State-registered association	Reimbursement to National Office for workplace express, onboard & CCH subscriptions/accommodation/campaign costs paid for by National Office	20,822	5,352
1/7/2024 – 30/6/2025	Medical Scientists Association of Victoria (MSAV)	State-registered association	Reimbursement to National Office for workplace express subscriptions/accommodation costs paid for by National Office	739	1,011
1/7/2024 – 30/6/2025	HSU WA (State Registered Union)	State-registered association	Reimbursement to National Office for workplace express subscriptions/accommodation costs paid for by National Office	4,694	1,147

Terms and conditions of transactions with related parties

The sales to and purchases from related parties are made on terms equivalent to those that prevail in arm's length transactions. Outstanding balances for sales and purchases at the year end are unsecured and interest free and settlement occurs in cash. There have been no guarantees provided or received for any related party receivables or payables. For the year ended 30 June 2025, the Health Services Union has not recorded any impairment of receivables relating to amounts owed by related parties and declared person or body (2024: \$Nil). This assessment is undertaken each financial year through examining the financial position of the related party and the market in which the related party operates.

Expected credit losses are immaterial and have not been recognised in relation to any outstanding balances.

Note 11B: Key management personnel remuneration for the reporting period

	2025 \$	2024 \$
Short-term employee benefits:		
Salary (including annual leave taken)	485,626	366,336
Annual leave accrued	75,996	45,259
Performance bonus	-	-
Provision of motor vehicle (non-monetary)	30,077	15,529
Total short-term employee benefits	591,699	427,124
Post-employment benefits:		
Superannuation	55,873	40,297
Total post-employment benefits	55,873	40,297
Other long-term benefits:		
Long-service leave	125,265	98,152
Total other long-term benefits	125,265	98,152
Termination benefits	-	5,160
Total key management personnel remuneration	772,837	570,733

Note 12 Remuneration of Auditors

	2025	2024
	\$	\$
Value of the services provided		
Financial statement audit services	25,000	23,645
Other services	9,000	1,000
Total remuneration of auditors	34,000	24,645

Other services provided by the auditors of the financial statements relate to auditing the South Australia/Northern Territory Branch Electoral Commission SA Associated Entity returns and auditing the South Australia/Northern Territory Branch membership data.

Note 13 Financial Instruments

The Health Services Union has financial instruments that are cash or cash equivalents, trade receivables, investments managed on behalf of the Health Services Union by Partnervest, and trade and some other payables that are carried at amortised cost.

Note 13A: Categories of Financial Instruments

Financial assets

At amortised cost:

Trade and other receivables	297,914	275,299
At fair value through profit or loss:		
Managed investments	1,050,778	-
Total	1,348,692	275,299

Carrying amount of financial assets

1,348,692	275,299
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Financial liabilities

	2025	2024
	\$	\$
At amortised cost:		
Trade and other payables	335,551	312,539
Lease liabilities	208,455	202,230
Total	544,006	514,769

Carrying amount of financial liabilities

544,006	514,769
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Note 13B: Net income and expense from financial assets

Financial assets at amortised cost

Interest revenue	3,246	14,798
Net income from financial assets at amortised cost	3,246	14,798

Note 13B: Net income and expense from financial assets (cont'd)

	2025	2024
	\$	\$
Financial assets at fair value through profit or loss		
Change in fair value of investments	50,778	-
Net income from financial assets at fair value through profit or loss	50,778	-

Note 13C: Net income and expense from financial liabilities

	2025	2024
	\$	\$
Financial liabilities at amortised cost		
Interest on lease liabilities	(21,198)	(8,410)
Net (loss) from financial liabilities	(21,198)	(8,410)

Note 13D: Credit risk

Credit risk is the risk that a counterparty will not meet its obligations under a financial instrument or customer contract, leading to a financial loss. The Health Services Union is exposed to credit risk from its operating activities (primarily trade receivables) and from its financing activities, including deposits held with banks. Set out below is the information about the credit risk exposure on trade receivables and contract assets using a provision matrix:

	Trade receivables and contract assets					Total
	Days past due					
	Current	<30 days	30-60 days	61-90 days	>91 days	
	\$	\$	\$	\$	\$	
30 June 2025						
Expected credit loss rate	0%	0%	2%	2%	2%	
Estimate total gross carrying amount at default	-	-	-	-	-	-
Expected credit loss	-	-	-	-	-	-
30 June 2024						
Expected credit loss rate	0%	0%	2%	2%	2%	
Estimate total gross carrying amount at default	-	-	-	-	-	-
Expected credit loss	-	-	-	-	-	-

For trade receivables and contract assets, credit risk is managed through maintaining procedures (such as the utilisation of systems for approval, granting and removal of credit limits, regular monitoring of exposure against such limits and monitoring of the financial stability of significant customers and counterparties) ensuring, to the extent possible, that members and counterparties to transactions are of sound credit worthiness and the recovery of accounts receivable is proactively monitored. Surplus cash is only invested with major/reputable financial institutions.

Health Services Union
Notes of the Financial Statements for the year ended 30 June 2025

Note 13D: Credit risk (cont'd)

An impairment analysis is performed at each reporting date using a provision matrix to measure expected credit losses. The provision rates are based on days past due for groupings of various customer segments with similar loss patterns. Generally, trade receivables are written-off if past due for more than one year and are not subject to enforcement activity. The expected credit loss rate will be applied to trade receivables and contract assets (other than a receivable from a Branch). This has not been applied in the current or previous financial year as all material trade receivables and contract assets are from Branches. Historically, all HSU Branches have paid their capitation/ACTU affiliation fees and the Health Service Union expects this trend to continue and has therefore not recognised any loss allowance. The Health Services Union does not hold collateral as security. The Health Services Union evaluates the concentration of risk with respect to trade receivables and contract assets as low.

The Health Services Union's maximum exposure to credit risk for the components of the statement of financial position at 30 June 2025 and 2024 is the carrying amounts as illustrated above.

Note 13E: Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities that are settled by delivering cash or another financial asset.

The following tables sets out the liquidity risk of financial liabilities held by the Health Services Union. They represent the contractual maturity of financial liabilities, calculated based on undiscounted cash flows relating to the liabilities at reporting date. The undiscounted cash flows in these tables differ from the amounts included in the statement of financial position that are based on discounted cash flows.

Contractual maturities for financial liabilities and lease liabilities are as follows:

	On Demand	< 1 year \$	1– 2 years \$	2– 5 years \$	>5 years \$	Total \$
Financial liabilities						
30 June 2025						
Payables	-	335,551	-	-	-	335,551
Lease liabilities - photocopier	-	9,871	9,871	21,360	-	41,102
Lease liabilities - office space	-	56,252	58,080	95,602	-	209,934
Total	-	401,674	67,951	116,962	-	586,587

	On Demand	< 1 year \$	1– 2 years \$	2– 5 years \$	>5 years \$	Total \$
Financial liabilities						
30 June 2024						
Payables	-	312,539	-	-	-	312,539
Lease liabilities - photocopier	-	4,968	4,968	13,662	-	23,598
Lease liabilities - office space	-	46,964	46,964	140,891	-	234,819
Total	-	364,471	51,932	154,553	-	570,956

Note 13F: Market Risk

Market risk generally includes interest rate risk, price risk and currency risk. Foreign currency risk is limited to the managed investments which is managed by Partnervest. The Health Services Union is exposed mainly to interest rate risk in relation to the returns received from its cash and cash equivalents and managed investments. The Health Services Union is exposed to equity securities price risk, arising from investments held and classified on the statement of financial position as fair value through profit and loss. This risk is managed by Partnervest, through diversification. The Health Services Union is not exposed to commodity price risk.

Note 14 Fair value measurements

Note 14A: Financial assets and liabilities

The Health Services Union assessed that cash, trade receivables, trade payables and other current liabilities approximate their carrying amounts largely due to the short-term maturities of these instruments.

The following table contains the carrying amounts and related fair values for the Health Services Union's financial assets and liabilities:

	Carrying amount 2025 \$	Fair value 2025 \$	Carrying amount 2024 \$	Fair value 2024 \$
Financial assets				
Managed investments	1,050,778	1,050,778	-	-
Total	1,050,778	1,050,778	-	-

Note 14A: Financial and non-financial assets and liabilities fair value hierarchy

The following tables provide an analysis of financial and non-financial assets and liabilities that are measured at fair value, by fair value hierarchy.

Fair value hierarchy

	Date of valuation	Level 1		Level 2		Level 3	
		2025	2024	2025	2024	2025	2024
		\$	\$	\$	\$	\$	\$
Assets measured at fair value							
Managed investments	30/6/2025	1,050,778	-	-	-	-	-
Total		1,050,778	-	-	-	-	-

Note 15 Section 272 Fair Work (Registered Organisations) Act 2009

In accordance with the requirements of the *Fair Work (Registered Organisations) Act 2009*, the attention of members is drawn to the provisions of subsections (1) to (3) of section 272, which reads as follows:

Information to be provided to members or the General Manager:

- (1) A member of a reporting unit, or the General Manager, may apply to the reporting unit for specified prescribed information in relation to the reporting unit to be made available to the person making the application.
- (2) The application must be in writing and must specify the period within which, and the manner in which, the information is to be made available. The period must not be less than 14 days after the application is given to the reporting unit.
- (3) A reporting unit must comply with an application made under subsection (1).

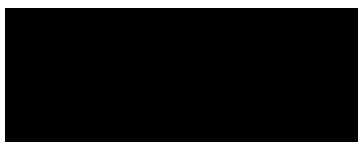
Officer declaration statement

I, Lloyd Williams, being the National Secretary of the Health Services Union, declare that the following activities did not occur during the reporting period ending 30 June 2025.

The reporting unit did not:

- acquire an asset or liability due to an amalgamation under Part 2 of Chapter 3 of the RO Act, a restructure of the branches of an organisation, a determination or revocation by the General Manager, Fair Work Commission
- receive revenue via compulsory levies/voluntary contributions
- receive revenue from undertaking recovery of wages activity
- incur fees as consideration for employers making payroll deductions of membership subscriptions
- pay compulsory levies
- pay to a person fees or allowances to attend conferences or meetings as a representative of the reporting unit
- pay a penalty imposed under the RO Act or the *Fair Work Act 2009*
- have a payable to an employer for that employer making payroll deductions of membership subscriptions
- have a separation and redundancy provision in respect of holders of office
- have other employee provisions in respect of holders of office
- have a separation and redundancy provision in respect of employees (other than holders of office)
- have other employee provisions in respect of employees (other than holders of office)
- have a fund or account for compulsory levies, voluntary contributions or required by the rules of the organisation or branch
- transfer to or withdraw from a fund (other than the general fund), account, asset or controlled entity
- have another entity administer the financial affairs of the reporting unit
- make a payment to a former related party of the reporting unit

Signature of designated officer:



Name and title of designated officer:

Lloyd Williams
National Secretary

Date: 21 August 2025