

Dear Supporter,

Art Union 185 (permit numbers NSW: GOC AU/1202, ACT: ACT R 10/0082) as issued under the provision of the Lotteries and Art Union Act, 1901.

There are only 29,000 printed. Art Union 185 will be drawn at 12.45pm on Wednesday, 1<sup>st</sup> September 2010.

Access Industries for The Disabled have conducted Art Unions for over 40 years. The income generated by our Art Union assists in providing employment for over 250 people with disabilities, working in our factories throughout NSW.

All our employees receive the benefit of full award conditions and training and support in work skills and habits, enabling them to undertake real work for real wages in a real work environment.

In addition, our Equal Access Employment Service assists up to 160 people with disabilities to achieve employment in open industry, where we provide ongoing training and support as necessary.

We would like to offer you the chance to win one of the wonderful prizes displayed in the brochure. Purchasing an Art Union ticket gives you that chance, as well as the opportunity to help others less fortunate than most.

**To purchase tickets in the current Art Union please print out the ORDER FORM below, fill in your details and either fax it to (02)9674 6538 or mail it to,**

**Access Industries for the Disabled Ltd P O Box 415 SEVEN HILLS NSW 1730. Or simply phone, Freecall 1 800 636 694 and pay by credit card.**

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**ARTUNION TICKET ORDER FORM**

Yes, I would like to purchase tickets in the Access Industries Art Union.

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> 1 Ticket \$35   | <input type="checkbox"/> 2 Tickets \$60   | <input type="checkbox"/> 4 Tickets \$100  | <input type="checkbox"/> 6 Tickets \$150   |
| <input type="checkbox"/> 8 Tickets \$200 | <input type="checkbox"/> 16 Tickets \$400 | <input type="checkbox"/> 20 Tickets \$500 | <input type="checkbox"/> 40 Tickets \$1000 |

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ State: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Charge my CREDIT CARD for \$ \_\_\_\_\_ Or I enclose a CHEQUE for \$ \_\_\_\_\_

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 Amex                       MasterCard                       Visa  
        

Credit Card Number:

Card Holders Name: \_\_\_\_\_ Expiry Date: /  
Signature: \_\_\_\_\_

*Thank you, for your generous support*