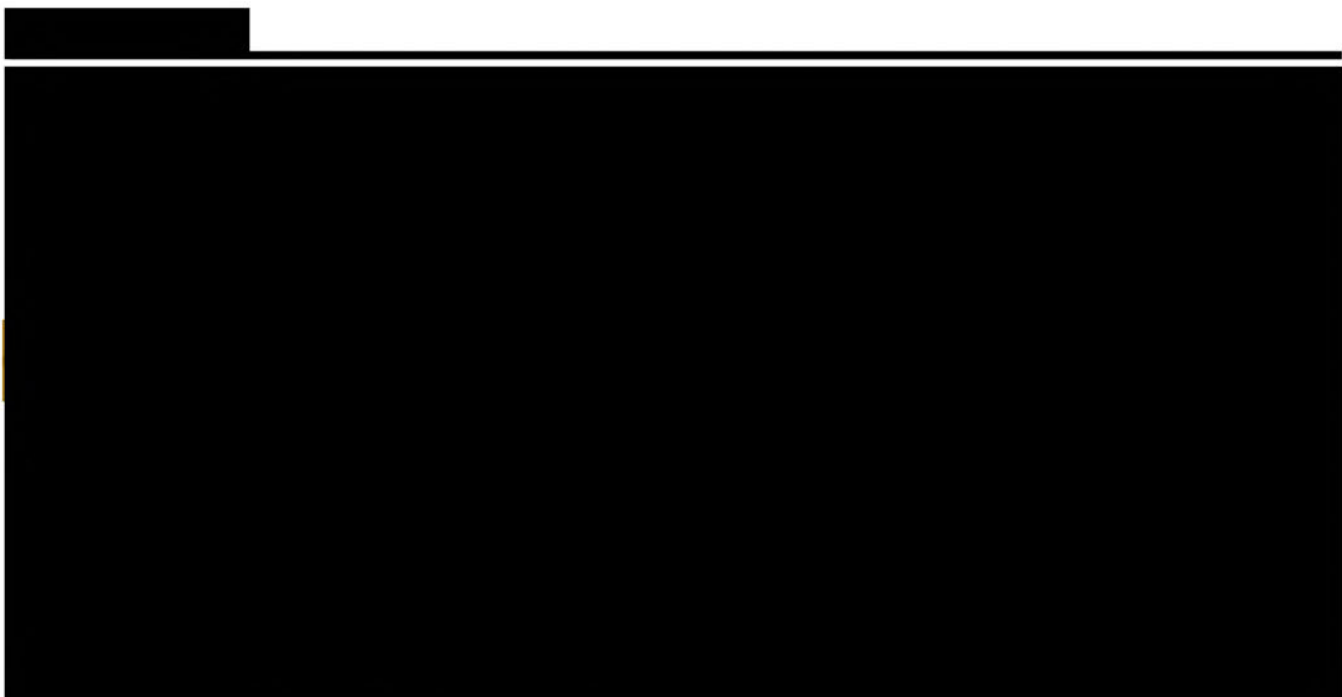


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From: [redacted] <[redacted]@qantas.com.au>
Sent: Wednesday, April 27, 2022 2:48 PM
To: [redacted]
Subject: Qantas Chairmans Lounge Application

Dear Ms Cass-Gottlieb

Firstly on behalf of Qantas sincere congratulations on your appointment as Chair of the Australian Competition and Consumer Commission ACCC. I manage the Whole of Australian Government Travel Contract for Qantas of which the ACCC is a member, and we have always enjoyed a good relationship with your organisation through this travel contract.

On behalf of our Chief Executive Alan Joyce AC I should like to invite you and your partner to become members of the Qantas Chairmans Lounge, and attach the application form for you to complete and return to me.

Kind regards [redacted]



Qantas Airways Limited

Level 1/ 9 Brindabella Circuit
Brindabella Business Park
Canberra International Airport ACT 2609
P. [redacted]
M. [redacted]
E. [redacted]@qantas.com.au

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From: [redacted] <[redacted]@qantas.com.au>
Sent: Monday, 13 January 2020 11:41 AM
To: [redacted] <[redacted]@qantas.com.au>
Subject: CL Applic WP



Qantas Airways Limited

Level 1/ 9 Brindabella Circuit
Brindabella Business Park
Canberra International Airport ACT 2609

P. [redacted]

M. [redacted]

E. [redacted]@qantas.com.au



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Qantas Airways Limited
ABN 16 009 661 901
Visit Qantas online at <http://qantas.com>

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CHAIRMANS LOUNGE MEMBERSHIP APPLICANT DETAILS

1	NOMINEE'S PERSONAL INFORMATION
Nominee's Frequent Flyer Number:	
Nominee's Given Names:	
Nominee's Family Name: CAPITAL LETTERS:	
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:	
Date of Birth:	
Mother's Maiden Name:	
Address (Home):	
Address (Business):	
E-mail Address:	
Phone (Hm):	
Phone (Mob):	
Phone (Bus):	
Position in Company / Organisation:	
Company / Organisation:	
INTERESTS: (AFL-specify club, Theatre, Rugby, Arts)	
2	SALUTATIONS (Mandatory)
Title:	
Salutation:	
Post Nominals:	
Name to be shown on Card:	
3	PARTNER'S PERSONAL INFORMATION
Partner's Frequent Flyer Number:	
Partner's Given Names:	
Partner's Family Name CAPITAL LETTERS:	
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:	
Date of Birth:	
Mother's Maiden Name:	
E-mail Address:	
Phone (home):	
Phone (mobile):	
4	NOMINEE'S PERSONAL ASSISTANT
Personal Assistant's Given & Family Name:	
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:	
E-mail Address:	
Telephone (Business):	

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CHAIRMANS LOUNGE MEMBERSHIP APPLICANT DETAILS

5	DETAILS OF PREVIOUS/OUTGOING INCUMBENT OF ABOVE CHAIRMANS LOUNGE POSITION
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other: <input type="checkbox"/>	
Chairmans Lounge Number	
New Department/Organisation	
New Position	
E-mail Address:	
Telephone (Business):	