

Deduction authority – Plane Creek & Sarina

Employee First Name & Surname:

Employee Site:

Employee Number:

I hereby authorise the following to be deducted from my pay on a weekly basis. I also authorise automatic increases to be made to applicable deductions when advised by institutions from time to time.

Deduction Description	SAP - WT	Amount
Australian Metal Workers Union	7415	
Australian Worker's Union	7433	
Australian Red Cross	7248	
Cancer Council	7264	
Children's Hospital Foundation Queensland	7267	
Cootharinga North Queensland	7114	
Cowboys Community Foundation	7284	
CQ Rescue	7201	
Endeavour Foundation QLD	7249	
GIVIT	7280	
Laurie's Love	7283	
Medibank Private	7010	
National Heart Foundation	7251	
Ronald McDonald House North Australia	7281	
RSPCA	7262	
Salvation Army	7265	
Townsville Hospital Foundation	7282	
Plane Creek Social Club Wages \$5.00 per week	7065	
Plane Creek Social Club Monthly \$5.00 per week/\$21.67 per mth	7145	

I **understand** Wilmar Sugar Pty Ltd provides relevant information in relation to each of the above deductions if requested by payee organisations

Employee's Signature: _____ **Date:** _____