

## **CENTERPAY DEDUCTION AUTHORITY**

Customer's Full Name		Customer's CRN	
authorise the Departm	ent of Human Services	to make a Deduction of \$ $\_$	
			amount
each fortnight from my			
	Name of Centrelink	payment (e.g. Newstart allowance)	
and pay this amount to	o Glenmore State High S	<u>School 555 125 035T</u> for scl	hool fees of
my student/s,		, Year/s	
-	Name of student/s		
commencing from			
	start date		

## Option 1 – Setting up a target amount

I request that this deduction of \$\_\_\_\_\_ continue until the target amount of \$\_\_\_\_\_ is reached.

**★ Note** if a Deduction has a target amount and the final Deduction is set to pay less than \$2, the second last Deduction will be increased by up to \$2 to cover the final amount.

OR

## Option 2 – Setting up an end date

I request that this deduction of \$\_\_\_\_\_ continue until \_\_\_\_/\_\_\_ is reached.

I give permission for Glenmore State High School to disclose my information to the Department of Human Services for the purpose of checking my account number, billing number and amount I want to pay, and reconciling my payment Deduction details.

I also give permission for Glenmore State High School to give the Department of Human Services my correct amount and billing number if required.

I understand that:

I can change or cancel my Deduction at any time; and further information about Centrepay can be found online at **humanservices.gov.au/centrepay** 

Customer Signature: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_/

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