



## Centrepay Deduction Authority

I (Name) \_\_\_\_\_

of (Address) \_\_\_\_\_

(Phone) \_\_\_\_\_ (CRN) \_\_\_\_\_

Authorise Services Australia to make a deduction of **\$25.00 each**

per fortnight from my \_\_\_\_\_ (Centrelink Benefit Name) and pay

this amount to RSPCA Tasmania account 555 077 624H for \_\_\_\_\_ (reason for deduction) commencing from the next pay cycle.

I request that the deduction of **\$25.00** 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.

I give permission for RSPCA Tasmania to disclose my information to Services Australia for the purposes of checking my account number, billing number and amount I want to pay, and reconciling my payment deduction details. I also give permission for RSPCA Tasmania to Services Australia my correct account 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](http://humanservices.gov.au/centrepay).

By signing below, I agree to repay the debt as listed above. If payments are cancelled at any stage, an account will be issued for the remaining amount and I will incur a \$20.00 (twenty dollar) account keeping fee.

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

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

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

**\*Photocopy of Photo ID and Centrepay card must be attached for this form to be valid\***