

Financial Advice Relating to Salary Packaging Declaration.

INSTRUCTIONS

Please complete and sign this form in order for this expense payment to be made. Without this declaration you will be liable for the Fringe Benefits Tax (FBT) on the amount Paywise pays towards this benefit.

Should you require any additional information please contact Paywise on 1800 PAYWISE (729 947).

I _____ declare that
(Full Name)

Financial Advice and Accounting Services were provided to me by or on behalf of my employer:

(Name of the Employer)

during the period of the FBT year from 1 April to 31 March and the expense was incurred by me for the following purpose(s):

(Please provide information to demonstrate that the expenses were incurred in earning assessable income).

I understand that this declaration is to apply to the above stated benefit and to any identical benefit for a period of five years from the date of the declaration or until the stated percentage incurred in earning my assessable income varies by more than 10 percentage points. This declaration will be revoked if another recurring expense payment fringe benefit declaration is provided in respect of a subsequent identical benefit.

Financial Advice and Accounting Services Requirements:

- Financial Advice and Accounting Services should be provided by a qualified advisor or tax agent. The advice received must encompass income producing activities.

Signature:

Print Name:

Date:

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