

# Workplace Giving

Deduction Authority Form



THE COMMON GOOD



**Yes!**

I would like to donate through Workplace Giving to make the world better, one discovery at a time.

Please deduct the following amount from each pay:

\$6     \$12     \$24     \$48     Other \$ \_\_\_\_\_

I understand this nominated amount will be deducted from the first available pay after receipt of this authorisation and will continue until authority is withdrawn by me.

Contact Details:

Mr     Mrs     Ms     Miss     Dr     Other \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Postal Address: \_\_\_\_\_

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

To review our privacy policy visit [www.thecommongood.org.au/privacy](http://www.thecommongood.org.au/privacy) For further information, contact [info@thecommongood.org.au](mailto:info@thecommongood.org.au)

Please submit this completed form into myHR under "Payroll Deduction Forms" then to The Common Good (The Prince Charles Hospital Foundation) via email [info@thecommongood.org.au](mailto:info@thecommongood.org.au) or reply envelope.



# Workplace Giving

Deduction Authority Form



**THE COMMON GOOD**



**THE COMMON GOOD**  
PEOPLE POWERING MEDICAL DISCOVERIES

AN INITIATIVE OF THE PRINCE CHARLES HOSPITAL FOUNDATION