

St. Patrick's Catholic School

55 Bradshaw Street, Latrobe. TAS 7307 Ph: (03) 6426 1626 Email: stpatslat@catholic.tas.edu.au

Centrepay Deduction Authority

I, (C	ustomer's tull name)	,
(Customer's CRN)		authorise Services Australia to make a
Deduction of \$		each week / fortnight (circle one) from my (name of
Centrelink payment)		and pay this amount to St.
Patr	ick's Catholic School, CRN 555053	978C for Education Expenses commencing from
(Date	e)	
	Option 1 - Setting up a targe	t amount
	I request that this deduction of	\$ continue until the target
	amount of \$	is reached.
	Note: if a Deduction has a target amoun amounts of less than \$2.00.	set, the final Deduction will increase by up to \$2.00 to cover any remaining
OR		
	Option 2 – Setting up an end	date
	I request that this deduction of	\$ continue until (Date)
	is reached.	
	Option 3 – Selecting neither	option 1 nor option 2
	I confirm that this deduction ha	s no target amount and no end date.
Scho	ool to disclose my information to Se	our personal information. I give permission for St. Patrick's Catholic rvices Australia for the purposes of checking my account number, , and reconciling my payment Deduction details.
	derstand that I can change or ca trepay can be found online at serv i	ncel my Deduction at any time; and further information about cesaustralia.gov.au/centrepay
Cus	tomer Signature:	
Date	e of Birth:	
Date	a·	