Workplace Giving Authorisation Form



This form is designed to assist employees from various organisations to activate a regular Workplace Giving donation to Good Sammy Enterprises from their payroll deductions.

Employee Detai	ls:
Full Name:	
Employee ID:	Department:
Email:	Phone:
Charity Details:	
Name of Charity:	Good Samaritan Industries trading as Good Sammy Enterprises
ABN:	63 826 265 059
DGR Status:	Endorsed as a Deductible Gift Recipient (DGR) under Subdivision 30-BA of the Income Tax Assessment Act 1997
WA Charity Licence:	17780
ACNC Registration:	Good Samaritan Industries ACNC Profile
Address:	33-35 Bannister Road, Canning Vale WA 6155
Charity Contact:	Sonia Nolan, Exec Manager, Marketing, Fundraising & Partnerships E: fundraising@goodsammy.com.au M: 0401 034 103
Bank Account:	Account Name: Good Samaritan Industries Bank: Beyond Bank BSB: 325 – 185 Account Number: 04117556 Please reference: WPG and your company name
Donation Details	s:
•	I Department to deduct the following amount from my wagest/ salary bove-mentioned charity:
Donation Amount (p	er pay): \$/ Start Date://
Pay Frequency:	☐ Weekly ☐ Fortnightly ☐ Monthly
☐ This is a recurring cancel.	donation until I notify the Payroll Department in writing to amend or
☐ I request a summar that this is not a tax-o	ry of donations for my tax records at the end of the financial year. <i>(note deductible receipt)</i>
•	me and contact details being shared with the charity for tax-deductible receipt purposes.

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Employee Declaration and Consent:

I understand and acknowledge that:

- The deduction will be made from my **post-tax income**, unless otherwise arranged.
- I can **amend or cancel** this arrangement at any time by providing **written notice** to the Payroll Department.
- The charity nominated is registered with the ACNC and is a DGR-endorsed organisation, eligible to receive tax-deductible donations.
- Donations are **voluntary** and not a condition of employment.
- The company is **not responsible for issuing tax-deductible receipts**; I will obtain them from the charity if required.
- My personal information will be handled in accordance with the **Privacy Act 1988** and used only for administering this arrangement.

Signature	Date
Payroll Office Use Only:	
Received by:	
Date Received:	
Date Received: Commencement Date: Payroll System Updated:	

Compliance Notes for Employers (Internal Use Only):

- Maintain a record of employee authorisations and any changes.
- ☑ Ensure compliance with Fair Work Act 2009 and Privacy Act 1988 in handling payroll and personal information.
- Record donations separately in the payroll system and provide year-end summaries if requested.
- ✓ Provide Good Samaritan Industries (t/a Good Sammy Enterprises) with a summary of donations upon request for employee tax receipts.
- ☑ Charity's current DGR status verified via ABN Lookup.
- This Workplace Giving Program complies with ATO Workplace Giving Guidelines.