

Salary Packaging Cancellation Form

1. Your Details (Please confirm who you are and where you work)

Organisation Name:	Payroll No:
Full Name:	Unique ID:
Postal Address:	
Contact No:	Date of Birth:

2. Cancellation Details:

I wish to cancel my Salary Packaging Arrangement effective from

Would you like to be contacted about maximising your final pay? (please tick):

 YES NO

PLEASE NOTE:

If you have a held balance with SalaryPackagingPLUS upon termination of salary packaging these funds must be finalised within 30 days. SalaryPackagingPLUS will close your account at the end of 30 days and any remaining balance held will be returned to your payroll. Please contact SalaryPackagingPLUS to discuss the release of funds.

If you currently have a Novated Lease you must contact your Lease Provider to advise them of the cancellation of your Salary Packaging Arrangement.

Please tell us the reason for cancelling your Salary Packaging Arrangement (please tick) :

<input type="checkbox"/> Changing Employer	<input type="checkbox"/> End of Contract	<input type="checkbox"/> Maternity Leave	<input type="checkbox"/> Retiring
<input type="checkbox"/> Not Financially Viable	<input type="checkbox"/> Other (Please Specify): _____		

3. Declaration

I confirm that the information given on this form is true and correct. I understand that SalaryPackagingPLUS will cancel my salary packaging arrangement based on the instructions supplied and that I am liable for any loss or damages, or Fringe Benefits Tax that may be incurred due to incorrect information provided in this form.

Signature:

Date: / /

<u>Office Use Only</u>	
<input type="checkbox"/> Any Held Balance to be paid out on termination	<u>Processed By & Date</u>
<input type="checkbox"/> Salary Packaging Cards Cancelled & Balance Refunded (ME & SP)	
<input type="checkbox"/> Emailed Final Activity Statement	
<input type="checkbox"/> If Novated Lease. Emailed advise to contact Leasing Provider.	
<input type="checkbox"/> Terminated System File	