



Centrepay Deduction Authority

I _____ *Customer's full name*
Customer's CRN _____ authorise Services Australia to make a Deduction
of \$ _____ each **fortnight** from _____ *name of Centrelink payment* and pay
this amount to **Capalaba State College** CRN 555-084-647-K for **Education** commencing
from _____ *start date*.

PLEASE CHOOSE:

Option 1 - Setting up a target amount

I request that this deduction per fortnight continue until the target amount of \$ _____ is reached.

★ **Note** if a Deduction has a target amount and the final Deduction is set to pay less than \$2, the second last Deduction will be increased by up to \$2 to cover the final amount.

OR

Option 2 – Setting up an end date

I request that this deduction continue until _____ *end date* is reached.

OR

Option 3 – Continue until cancelled

I give permission for **Capalaba State College** to disclose my information to Services Australia for the purposes of checking my account number, billing number and amount I want to pay, and reconciling my payment Deduction details.

I also give permission for **Capalaba State College** to give Services Australia my correct account and billing number if required.

I understand that:

I can change or cancel my Deduction at any time; and further information about Centrepay can be found online at <https://www.servicesaustralia.gov.au/individuals/services/centrelink/centrepay>.

Customer Signature: _____

Date of Birth: _____

Date: _____