



**QUEENSLAND AMBULANCE SERVICE  
LEGACY SCHEME INCORPORATED**

**STAFF DONATIONS via PAYROLL CONTRIBUTION**

I, \_\_\_\_\_ Payroll Number, \_\_\_\_\_

authorise the QAS payroll office to deduct \$\_\_\_\_\_ (Nominal \$10 per fortnight)

Address for Receipt: \_\_\_\_\_  
\_\_\_\_\_

**fortnightly** from my pay until otherwise advised by me

**once** from my pay

for a **Tax Deductible Gift Donation** to the **Queensland Ambulance Service Legacy Scheme Incorporated**.

I understand that donations must be \$2.00 or above to be tax deductible under Australian Tax Office guidelines.

Signed ..... Date .....

Email form to: [gas.legacy@ambulance.qld.gov.au](mailto:gas.legacy@ambulance.qld.gov.au)

Post form to: **Queensland Ambulance Service Legacy Scheme  
PO Box 108  
Bundaberg QLD 4670**

**Please Note:** Official Tax Deductible Receipts will be issued during the month of July in the next financial year.