

WORKPLACE GIVING PROGRAM



Payroll Deduction Authority - Cancellation Form

I wish to cancel my payroll deduction starting from my next pay.

Cancellation requests will be required seven days before the commencement of a new pay period to ensure the action can be completed in a timely manner by payroll services.

Contact details:

Mr Mrs Ms Miss Dr Other

First Name: Last Name:

Payroll Number: Department:

Primary Campus Location:

Email:

Mobile: Phone:

Postal Address:

Suburb: State: Postcode

Signature: Date:

Once completed:

-  Upload this form into your 'MyHR' for payroll to process.
-  Email us at info@wishlist.org.au to let us know you've cancelled.

