

## EMPLOYEE SALARY PACKAGING SETUP INFORMATION FORM

The information you provided on this form will be used to calculate the amount you can salary package. Please ensure that this information is as accurate as possible. You will be required to substantiate these figures at a later date. If there are any changes to the information that you provided YOU MUST IMMEDIATELY advise the CBB and your employer.

Supporting documentation IS NOT required with this form

(PLEASE PRINT CLEARLY)

EMPLOYER NAME: \_\_\_\_\_

YOUR WORK LOCATION: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ANNUAL INCOME \$ \_\_\_\_\_

EMPLOYMENT START DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DO YOU:-

Have a HECS Debt: Y/N, SFSS Loan: Y/N, Receive or pay child support: Y/N

Have Private Hospital Cover: Y/N, Private use of a company car: Y/N

REMOTE AREA BENEFITS

period 1st April to 31st March  
this FBT year

CBB Office Use  
Only

**Mortgage Interest** (The principal residence only in the remote area in which you work.)

\$ \_\_\_\_\_

\_\_\_\_\_

**Rent** (The principal residence only in the remote area in which you work.)

\$ \_\_\_\_\_

\_\_\_\_\_

**Household Fuel**

(Electricity, Gas, Oil, Wood) # **Not Water** #

\$ \_\_\_\_\_

\_\_\_\_\_

**Airfares**

(Only when incurred in conjunction with annual leave of 3 days or more and travel is to the capital city in Australia from which you were employed)

\$ \_\_\_\_\_

\_\_\_\_\_

**Childcare Expenses** (Employer in-house facility only)

\$ \_\_\_\_\_

\_\_\_\_\_

Phone Contact Numbers: (H)..... (W).....(M).....

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

PLEASE FORWARD TO:

Facsimile No.:

08 8244 9145 Attention:

Email:

sp-clientservices@cbb.com.au

Mail:

Community Business Bureau Inc.  
PO Box 485, Woodville, SA 5011

