BOOKSHOP 2024 Q4 WORKING FROM HOME PRICE ON APPLICATION PAYROLL DEDUCTION AUTHORITY AND PURCHASE AGREEMENT



Fixed Term and Continuing Employees only (not available to casual employees) Terms and Conditions apply - see bookshop.cqu.edu.au/terms.asp for details

1. EMPLOYEE			
Payroll Number	Bookshop Account (if different)		
Family name			
Given names			
Department			
2. DEDUCTION AND PURCHASE AGREEMENT (PRICE ON APPLICATION)			
Fortnightly Deduction	\$ 00.00	Description of Goods	
Total to Deduct	\$ 00.00		
(minimum \$.	per fortnight to cover 12-month agreement)		
l authorise the above amount from the option selected to be deducted from my fortnightly pay from the next payroll date after processing until the amount is paid in full. I understand that if I cease employment with the university, any outstanding balance will be deducted from my final salary payment. If my final salary payment is insufficient to cover the outstanding debt, I will liaise with the Bookshop to make alternate repayment arrangements within 30 days or my account will be passed to the COUniversity Australia Finance Division for debt collection. I have read and fully understand the COUni Bookshop Terms and Conditions (see above) and agree to abide by them.			
I also authorise the purchase of the goods described above from CQUniversity Bookshop, inclusive of GST and delivery to residential or business addresses within Australia. I understand that this agreement is dependent on stock availability and that the full amount of the purchase must be paid within 12 months. I understand that CQUniversity Bookshop is not responsible for service and support of this purchase beyond that required by Australian law.			
Employee signature			Date D / M M / Y Y
Email application to bookshop-promotions@cqu.edu.au (where possible please use your CQUniversity email account to submit your application)			
Alternatively post your application to Bookshop Accounts, Building 35, Bruce Highway, Rockhampton North QLD 4701			
Delivery Address Line 1 (or write Rockhampton Campus Store):			
Delivery Address Line 2:			
Delivery Address Line 3:			
Town/City	Mobile	Contact (required:)	State Postcode
BOOKSHOP USE ONLY	,		
INVOICE/CUSTOMER NUMBE			INVOICE ATTACHED
DEDUCTION CHECKED			DATE D D / M M / Y Y
AND AUTHORISED			
> SCAN AND EMAIL TO PAYROLL@CQU.EDU.AU FOR PROCESSING			
PAYROLL USE ONLY			
ENTERED			DATE D D / M M / Y Y
CHECKED			DATE D D / M M / Y Y
FNE			