



GLENN PANNAM ACCOUNTING

AUTHORITY TO RECEIVE FEE PAID FROM REFUND SERVICE

I request to pay accounting fees to Glenn Pannam Accounting from my tax refund. I understand I will receive the balance of my tax refund deposited electronically to the stated account below. I accept that I am responsible for providing correct information and that incorrect information may cause delays in receiving refund money.

I authorise you to direct the Australian Tax Office to deposit my tax refund into the relevant trust account and to deduct fees as per the calculation below. The balance remaining after deduction of the listed fees is to be repaid to my nominated bank account below.

I acknowledge that:

- a. should any variation arise with the Australian Tax Office or my refund cheque is forwarded to me in error, I will pay the fee owing directly within 7 days of written notice.
- b. where due to an error on the part of Glenn Pannam Accounting, the Australian Tax Office or myself, payment is made to me in excess of the correct amount due to me by the Australian Tax Office, I will refund the difference within 7 days. I further understand that in the event of me not repaying any outstanding amount, I am liable for collection costs and charges.
- c. I further agree that as per a. & b., if I do not refund the difference within 7 days, I authorise all or part of the difference to be repaid from my nominated bank account below. I authorise GAP Tech Pty Ltd (ABN 99 006 342 909) T/A Glenn Pannam Accounting, to make this deduction on *Tax Practice's* behalf. I am the authorised signatory of the stated account/card. I agree not to cancel this authority until any amount outstanding is repaid.
- d. there are no amounts outstanding to the Australian Tax Office or in relation to child support and/or Centrelink in my name.
- e. Privacy: I understand and authorise that my Tax File Number (TFN) may be used for the purpose of reconciliation in paying my fees from my refund. It is under no circumstances to be made public.

Name: _____

Address: _____

Contact Business Hours: _____

Contact After Hours: _____

Account details for deposit of funds

BSB: _____

Bank Account Number: _____

Account name: _____

Authorised: _____

Date: _____