

**The Orangutan Project
Workplace Giving EMPLOYER Form**

This form must be completed by an Employer wishing to include TOP in a Workplace Giving Program.

Please return the form to TOP by email admin@orangutan.org.au or mail to the address below

TOP has Deductible Gift Recipient Status (DGR)

Company/Organisation Details			
Company/Organisation Name:			
Address Details			
Street Address:			
City:	State:		
Postcode:	Country		
PO Box:	PO Box City:		
PO Box State:	PO Box Postcode:		
Contact Details			
Contact Name:			
Contact Position:			
Email:			
Contact Phone:		Contact Fax:	
Payroll Contact Name:			
Payroll Phone		Payroll Fax:	
Donation Details <i>(Workplace Giving payments can be made by EFT, direct deposit or cheque) See overleaf for deposit details</i>			
First Payment Date:			
Payment Frequency: Weekly/ Fortnightly/ Monthly/ Other (please specify)			
Receipt Details <i>(please note that TOP cannot receipt individual employees)</i>			
Do you want TOP to receipt your contribution?			Yes/No
If yes, how often?			
Name on receipt:			
Payment Summary to TOP-Australia			
To ensure all donations are recognized are recognized and credited correctly, TOP requests a simple payment summary of your contributions			
Report Frequency:	Monthly	Other (specify)	
Office Use Only			

COMPASSION PROTECTION FREEDOM

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