

OTHER BENEFITS SCHEDULE



BUSINESS NAME:

PERIOD: 1 April 2020 – 31 March 2021

EMPLOYEE NAME	DESCRIPTION OF EXPENDITURE	DATE PAID	COST (INC. GST)	BUSINESS RELATED %	AFTER-TAX EMPLOYEE CONTRIBUTIONS	DOES YOUR ORGANISATION PRODUCE GOODS OR SERVICE PROVIDED YES/NO	MARKET VALUE OF BENEFIT PROVIDED (INC GST)

Name or Person Making Declaration

Signature

Date