

## **Gifts and Benefits Declaration form**

Use this form to declare a gift or benefit you have received in accordance with the Department's Gifts and Benefits Policy and Finance Business Rule (FBR) R.10.1.

## Information about the Gifts or Benefits\*

*Date gift or benefit received		28 June 2019			
*Gifte	r organisation or person	s 33			
Relationship of gifter to the		-			
Department/official (e.g. contracted, regulatory or peak body)		Foley - government			
Item	*Description	Sake transfers - penter			
	*Value per unit	3130			
	How was the value determined?	Irlant Composiss-			
	*Quantity	1			
	*Total value	130			
*Reason for accepting gift or benefit		Souvenier - 1 paid value of Sift > \$50 Carolini Educati			
		2.14 > 120			
*Recipient of gift or benefit		Carolini Edvats			
Is there any conflict of interest in					
accepting the item (This should be considered in light of the gift, its value and the gifter's relationship with the Department)		No			
*Where is the item stored (e.g. has it been retained by staff member, is it on display in Department or has it been disposed of, if so how – refer to Finance Business Rules)		Referred by staff nearle (Loving poid \$80)			
*The abo	*The above information will be exceeded on the Division's Cife and Develop Pagister				

## Recipient to complete

Name JIMER TON	Carolie Edvars,
Position title	Dep. Sec.
Section	1
Branch	
I have read and understood the Department's Gifts and Benefits Policy, and relevant sections of FBR R10.1 and agree that the above action is in accordance with the Policy and FBR.	Sign/date

## Unit Head (refer to Gifts and Benefits Policy) to complete

Name	Matt Yannopowos
Position title	chief Operating Officer
Division/Branch	
I agree that the above action is in accordance with the Policy and FBR.	Sign/date 29 /7/19
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Once this form has been completed and signed by the Unit Head, the recipient should scan and submit it to their Finance Business Partner for recording the gift or benefit on the divisional Gift to DOH Register.

The recipient of the gift or benefit is responsible filing and retaining the original of this form in accordance with the Records

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