Document Title Here

Please find enclosed payment of Sheep Industry Fund contributions collected in accordance with the provisions of the *Primary Industry Funding Schemes (Sheep Industry Fund) Regulations 2014* (the regulations).

Collection Agent Details

|  |  |
| --- | --- |
| Company name: |  |
| Business/Trading name: |  |
| ABN: |  |
| Address: |  |
| Contact person: |  | Phone: |  |
| Contact email: |  |

Contributions Payable

|  |  |  |
| --- | --- | --- |
| The contribution payable is for the sheep that were sold in: |  |  |
|  | *(month / quarter) (year)* |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Sale** | **Total # Sheep & Lambs Sold \*** | **Contribution Rate (per sheep)** | **Total** |
|  |  | $0.67 | $ |
| *\* Refer to detailed breakdown under ‘Required Information’ (page 2)* | **$** |

Payment Method

|  |  |  |
| --- | --- | --- |
| ❒ | A **cheque** for this amount (payable to the SA Sheep Industry Fund) is attached | **PIRSA Bank Account Details**Account Name: PIRSA Collections AccountBSB: 015-101Account Number: 838531884Reference: Your company name |
| ❒ | An **Electronic Fund Transfer** has been made to the account details shown at the right\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_ *EFT payments: please enter payment date* |

Credit card payments are available on request (please email PIRSA.LivestockFunds@sa.gov.au to arrange).

Declaration

I declare that, to the best of my knowledge and belief, the information provided in this financial statement and any attachment is correct in every particular, and represents all Sheep Industry Fund contributions collected by me as a collection agent in accordance with the regulations. *[Making a statement that is false or misleading in any information provided for the purposes of the regulations is an offence]*

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  / / |

Lodgement

On completion, please forward this form, any attachments and payment (where relevant) to:

**Mail:** Sheep Industry Fund, C/O PIRSA Biosecurity – Animal Health, 33 Flemington Street GLENSIDE SA 5065

**Email:** PIRSA.LivestockFunds@sa.gov.au

This form, any attachments and payment is due within 14 days after the end of each quarter.

Required Information

Details about the sheep producers (vendors) for whom the contributions are being forwarded may be entered below. If details are not entered below or provided on a separate attachment, they MUST be maintained and available for auditing if required.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of sale** | **Producer Name** | **Producer Address** | **# Sheep Sold** | **$ Collected** |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
| **Total** *(must match total contribution payable as declared on page 1)* | **$** |

*If insufficient space, please add additional rows or attach a printout of sale dates containing information outlined in the table template above.*