**ANNEXURE 3**

**Milestone 2 Report - Employees**

**(see Funding Deed Clause 3.2 and Schedule Clause 4)**

Business Name:

Application number:

Payment of employee entitlements

|  |  |  |  |
| --- | --- | --- | --- |
| Employee name | Period of employment | Date final entitlements paid | Amount of entitlements paid |
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I,…………………………………………………………, of …………………………………………………………, being a qualified accountant, certify that all the employees of [REGISTERED BUSINESS NAME], have been paid all entitlements owed to them.

…………………………………….. *(Signature)* on this ………………day of ………………..2012

*Note: Please attach sheet if insufficient space to list details for all employees.*