**ANNEXURE 4 (b) – ongoing employees**

**Milestone 2 Report – Employee Statement**

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

Business Name:

Application number:

I, .........................................................................................., of ...................................................................................................................................

 (Employee address)

an employee of ............................................................................................................................................................................................................

 (Business name)

declare that my wages have been paid and that my superannuation contributions have been fully acknowledged in relation to my employment

with .............................................................................................................................................................................................................................

 (Business name)

My other entitlements including but not limited to recreation leave have also been acknowledged by my current employer.

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Signature of employee Signature of witness

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated Name of witness

*Note: Please provide a statement for all employees of the grantee covering all entitlements.*

I wish to receive further information about Australian Government assistance for Tasmanian forestry workers.