

Attachment 2

Approved form – Gifts and Benefits Register – June quarter 2015

Date given or received	Description of gift or benefit	Value	Name of donor ¹	Name of recipient	For gifts received was the gift: a) retained by employee; or b) Retained by agency.	Reasons for accepting or giving (what is the benefit to the Queensland community)	Name & signature of accountable officer or supervisor.
Gifts Given							
No gifts over \$150 given in the June 2015 Quarter							
Gifts Received							
No gifts over \$150 received in the June 2015 Quarter							

¹ For organisational donors, include name of organisation. If donor is an individual, use a generic reference. E.g. "individual", "family of patient".