

FORM FOR REGISTERING GIFTS, BENEFITS, AND ENTERTAINMENT WITH A VALUE EQUAL TO OR OVER \$250

PERSONAL INFORMATION	
Date:	Your position:
Your name:	Your Faculty/Department:
Your contact details (mobile and email):	Your Executive Dean or Executive Group Member's name and contact details (email):
DETAILS OF GIFT, BENEFIT OR ENTERTAINN	AENT I
Describe the Gift, Benefit or Entertainment you I (Please explain the mutual benefits associated with the offer	have been offered or have received:
Provide the value of the Gift, Benefit or Entertaireasonable estimate should be assigned): (Please note if this is aggregated Gifts, Benefits or Entertain)	•
Date you were offered or received the Gift, Bene	fit or Entertainment:
Was the offer / presentation accepted?	S/ NO
Name the person and entity or organisation who or Entertainment:	o made the offer / presentation of the Gift, Benefit
Have you been offered or received any Gift, Ben previously? YES/ NO If yes, please previously?	efit or Entertainment from that person/entity provide details:
Was the Gift, Benefit or Entertainment offered / Other – please, specify:	presented to (a) University (b) Recipient/s (c)
Please provide Other relevant information?	
EMPLOYEE SIGNATURE	SUPERVISOR SIGNATURE
Print name:	Print name:
Date:	Date:
Please forward this form to the Office of the relevant Exec	utive Dean or Executive Group Member.
Note to the Executive Deans and Executive Group Membe Procurement Officer via <u>chiefprocurementofficer@mq.ed</u>	ers: upon reviewing this form, please forward to the Chief u.au.
	Benefit and Entertainment Register maintained by the Office
n the Chief Procurement Officer.	
Entered in Gift, Benefit and Entertainment Register by:	

Date: