

When completing this form:

- Use a blue or black pen;
- Use BLOCK LETTERS;
- Print only and write clearly.

COMPANY NAME	
TRADING NAME	
MAILING ADDRESS	
ACCOUNTS CONTACT PERSON	
CONTACT PHONE NUMBER	
CONTACT EMAIL ADDRESS	
REMITTANCE EMAIL ADDRESS	
ABN	
REGISTERED FOR GST	YES <input type="checkbox"/> NO <input type="checkbox"/>
BANKING DETAILS	
BSB	
ACCOUNT NUMBER	
ACCOUNT NAME	

OFFICE USE ONLY

CREDITOR NUMBER	
VERIFYING OFFICER	
DATE	