PAYMENT REQUEST FORM – CLUBS ONLY

PAYEE DETAILS	
CLUB NAME/MDA	
NAME (WHO ARE WE PAYING?)	
ADDRESS	
	POSTCODE:
EMAIL	
PHONE	

TYPE OF PAYMENT
☐ REIMBURSEMENT
☐ PAYMENT TO SUPPLIER
☐ OTHER

PAYMENT DUE BY:

PAYMENT METHOD	
☐ BPAY	BILLER CODE:
	BILLER REF:
☐ BANK TRANSFER	BSB (6 digits):
	ACCOUNT NUMBER:
☐ PETTY CASH (compulsory for up to $50, optional to $50-$100)	
DUSA use only ISSUED BY:	DATE:
COLLECTED BY:	DATE:

INSTRUCTIONS

→ *Complete this form filling out all the required fields*

→ *Attach supporting documentation – must be a tax invoice or tax receipt*

→ *Forward to your Clubs Coordinator for authorisation*

PAYMENT DETAILS

(If unsure how to calculate GST please leave blank)

DESCRIPTION OF WHAT PAYMENT IS FOR (ie Date/Name of Event)	***ACCOUNT CODE* (PLEASE LEAVE BLANK)**	***AMOUNT*** *(EXCL. GST)*	***GST***	***TOTAL*** *(INCL. GST)*
	TOTAL AMOUNT OF PAYMENT			

AUTHORISATION

Please note you cannot sign your own reimbursement, it must signed by two other executives

CLUB TREASURER/PRESIDENT : Signature _____ Print Name _____ Date _____

CLUB EXEC APPROVAL: Signature _____ Print Name _____ Date _____

DUSA AUTHORISATION: Signature _____ Print Name _____ Date _____