

INVOICES WILL ONLY BE PROCESSED AFTER FINANCE HAVE CONDUCTED
 A PAYMENT HISTORY CHECK FOR THIS CUSTOMER

SECTION A – GENERAL INFORMATION

Requester Name		School/Directorate	
Customer already exists in myFinance?	Yes No	If Yes, Customer name	myFinance ID
Select required Request type(s)	New Customer (complete Section B) Change of Details (complete Section B)	Invoice (complete Section C) Credit Note (complete Section D)	
Requester Comments			

SECTION B - NEW CUSTOMER / CHANGE OF DETAILS

NEW CUSTOMERS ONLY – TRADE REFERENCE CHECK

Provide 2 Trade Referees if ALL the following exists: <ul style="list-style-type: none"> Contract ≥ \$20,000 Non-Government entity No signed Agreement in place 	Business Name 1. 2.	Phone number
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NEW CUSTOMER / CHANGE OF DETAILS

ABN	Entity name
Contact name	Postal Address
Email	
Phone	

SECTION C – INVOICE

Verify Customer Email		Payment has been received?	Yes No	Requester requires copy of invoice?	Yes No
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INCOME ALLOCATION

SOURCE CODE	ACCOUNT	DEPT	PROJECT	AMOUNT EXCL GST	GST Y/N	GST AMOUNT	TOTAL AMOUNT

EXACT TEXT & FORMAT TO APPEAR ON INVOICE

Description Summary (30 characters or less)	Amount (incl. GST)
Additional information (incl. PO # is available)	
I confirm a copy of the Customer's PO / email authorisation / Agreement to invoice, and agreement to pay within 30 days of receipt of invoice, is attached.	Signed authorised Financial Delegate

SECTION D – CREDIT NOTE

Customer ID	Customer Contact Name	Invoice # to credit
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EXACT TEXT & FORMAT TO APPEAR ON CREDIT NOTE

	Amount (incl. GST)
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Requester requires copy of Credit Note?	Yes No	Signed authorised Financial Delegate	
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PLEASE SUBMIT COMPLETED FORM VIA FINANCE SERVICE PORTAL

SECTION E – TO BE COMPLETED BY FINANCE

Request ID	Customer #	Invoice #	Credit Note #
Entered by	Date	Comments	