

## FORM: Creditor Information

CREDITOR DETAILS			
BUSINESS NAME:			
MAILING ADDRESS:			
ABN:		REGISTERED FOR GST:	YES NO
ACCOUNTS CONTACT:		SALES CONTACT:	
ACCOUNTS PHONE:		SALES PHONE:	
ACCOUNTS EMAIL:			
SALES EMAIL:			
ACCOUNT REFERENCE:			
ORDERING ADDRESS: <i>(If different from mailing address)</i>			
PAYMENT OPTIONS			
PREFERRED PAYMENT:	CHEQUE ELECTRONIC FUNDS TRANSFER (EFT) <i>Please complete details below.</i>		
BANK DETAILS:	ACCOUNT NAME:		
	BSB:		ACCOUNT NUMBER: <input type="text"/>
	BANK NAME:		
PREFERRED RECEIVAL OF REMITTANCE ADVICE	EMAIL	MAIL	
ADDITIONAL INFORMATION TO NOTE			

*Information is collected for the sole purpose of Barcoo Shire Council purchasing and accounts payable procedures and will be managed in a responsible, secure manner, in compliance with the information privacy principles outlined in the Information Privacy Act 2009. Access to this information is restricted to authorised staff within the relevant departments of Council.*