# Credit Card Payment Authority

## Authority for payment by credit card

I authorise the Department of Industry, Tourism and Trade to charge my credit card as follows:

|  |  |  |
| --- | --- | --- |
|  |  |  |

First Name Last Name

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | / |  |  |  |  | / |  |  |  |  | / |  |  |  |  |

Credit Card Number

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | / |  |  |  |  |  |  |  |  |  | $ |  |  |  |  |  | . |  |  |

Month (MM) / Year (YY) Expiry Date Amount

**Billing Address**

|  |
| --- |
|  |

Street Address

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

City State Post Code

|  |
| --- |
|  |

Email Address

|  |  |  |
| --- | --- | --- |
|  |  |  |

Signature Date

**Agency Use Only - DITT Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| GL Account Code:  | 9 | 2 | - |  |  |  |  |  |  |  | - |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Tax code: (circle one) | S10 | N00 | A00 |  | Invoice/Ref #: |  |

|  |  |
| --- | --- |
| Description of Good/Services: |  |
|  |  |  |  |
| Division Officer Name: |  | Phone: |  |
| Email: |  |

Receipt to be (tick one):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Emailed to Div. Officer |  | Posted to Client/Advice to Div.Officer |  | Emailed to Client/Copy to Div.Officer |