



SUPPLIER MAINTENANCE FORM

(Electronic Funds Transfer Details)

Please return form to: Queensland University of Technology Department of Financial Services Level 8, 126 Margaret Street Brisbane, QLD, 4000 Email to: qut.finvendor@qut.edu.au or Fax to: (07) 3138 2204	Finance Only	
	Agent Code	Supplier Number

Part A – Vendor Type (please tick appropriate box)			
Supplier	<input type="checkbox"/>	ABN	<i>(11 digits)</i>
Visiting Academic	<input type="checkbox"/>	(complete if Visiting Academic is not on the QUT Payroll)	
Student	<input type="checkbox"/>	Student Nr	<i>(8 digits)</i>

Part B – Business / Personal Details			
Business Name			
Family Name			
Given Name(s)			
Address (postal)			Postcode
Telephone Number		Fax Nr	
E-mail Address	<i>(for Remittance advice notifications)</i>		

Part C – Bank Details			
This information is required to allow direct electronic funds transfer (payment) to your bank account. The University will treat this with the strictest confidence.			
Account In The Name of			
Financial Institution			
Branch Name			
Account Number			
Bank Number <i>(Complete <u>one</u> only)</i>	Australian Bank Accounts		International Bank Accounts
	BSB	-	IBAN
		<i>(format: XXX-XXX)</i>	
			SORT
Nominated Currency			

Authorisation			
I certify that the above details are correct and authorise payment to be made to the bank account indicated.			
Signature		Date	
QUT Contact			

PLEASE NOTE - To ensure confidentiality of this information, please enclose the completed form in a sealed envelope marked 'Private and Confidential'.