



Request for Tax Invoice

This form is required if you wish to pay via cheque, debit card or wire transfer.

Please fill out either the Personal Details section or the Company Details section.

Personal Details

Title Mr Mrs Ms Dr Prof A/Prof

First Name _____

Last Name _____

OR

Company Details

Company Name _____

ABN _____

Street Address _____

Suburb _____

State _____

Postcode _____

Country _____

Phone No. _____

Fax No. _____

E-mail Address _____

Date _____

Please submit the completed form to Hazel Chea at hazel.chea@uts.edu.au