Request for payment when no invoice is available

Do you have to make payment for goods or service, but don't have an invoice?

> Apply via e-Procurement, UNLESS exception applies, then follow these steps >

- This form is only to be used for: foreign currency requests, Fleet SA petty cash, Electorate Services non-invoice payments (MPs), personal petty cash reimbursements.

 All other requests are to be made via the Purchase Management module of e-Procurement.
- Complete vendor details, description and GST inclusive amount for each payment request
- Ensure payment is authorised by appropriate financial delegate and original documents are attached
- Enter account number and tax code details

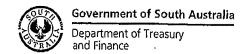
Any questions completing your request? Call:
Purchase and Facilities
Telephone 08 – 8226 2699
Send the completed form to:
Shared Services SA

DTF Accounts Payable

Payment details		
Vendor (name and address)	Date of purchase	e/s
Steven Marshall C/- Parliament House, GPO Box 572, North Terrace, Adelaide SA 5000	22 / 09 / 201	115
Description of goods or services	Total incl. G	3ST
Reimbursement for Postage Services	\$ 122	2.3
	\$	
	\$	
Vehicle registration and odometer reading — for pool car use		
	\$	
	2.2	
Total payment	\$ 122	
Authorisation details		2.3
Authorisation details IMPORTANT: All original documentation must be attached. Áttached		2.3
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Authorisation details IMPORTANT: All original documentation must be attached. Approved by (print name and title)		2.3
Authorisation details IMPORTANT: All original documentation must be attached. Certified by (print name) Approved by (print name and title) Fotina Dimas Paul Tatarelli - Manager, Electorate Ser	rvices	
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Authorisation details IMPORTANT: All original documentation must be attached. Certified by (print name)	vices Date 10 / 201)15
Authorisation details IMPORTANT: All original documentation must be attached. Certified by (print name) Fotina Dimas Paul Tatarelli - Manager, Electorate Sersignature Signature Account details Account number Tax code GST excl. amount	Date Date 10 / 201)15
Authorisation details IMPORTANT: All original documentation must be attached. Certified by (print name)	Date Date 10 / 201)15



This form is for when no invoice is available and payment is required



Request for payment



Payment details

- Complete vendor details, description and GST inclusive amount for each payment request
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- 3 Enter account number and tax code details

Any questions completing this form? Call: Accounts Payable Officer Telephone 08 - 8226 3501 Send the completed form to: Corporate Services Accounts Payable Officer

Vendor	Date of purchase/s
O Steven Marshall 1500	
Description goods of services	Total incl. GST
1150 Requirements.	s
1150 Requirement money order	s
- Photos	\$
- end opels Total payment	\$ 122.30
Authorisation details	
IMPORTANT: All original documentation must be attached. Lettified by (print name) Approved by (print name and title)	
Steven Marshell Steven Marshell	
Signature	Date
Emall Emale	* <u>29,SEP 2015</u>
	2.70 y 10 y 10 y 10 y
Account details	
Account number Tax code GST excl. amount GS	ST Total incl. GST
<u> </u>	\$ 0.00
	\$ 0.00
<u> </u>	\$ 0.00

Only users with a minimum of Acrobat Reader 7 are able to SAVE this form.

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INDONESIAN EMBASSY
Issue Ordinary Fee 8,95
EP Large Envelope x 2 14,40 *
EP Medium Envelope x 2 12,00 *
TOTAL \$122.30

Payment Tendered Details : Cash

Payout Details : Change 2.70-

125,00

* POST supplied, price includes GST.
GST on POST Taxable Supply: 3.94

ABN:28 864 970 579 TAX INVOICE

Privacy Notice

Australia Post collects, uses and stores your personal information as part of the ID Photos - email digital copy service. This service allows Australia Post to provide a hard copy passport photograph as well as a digital passport photograph to a nominated email address. Without this information, Australia Post will be unable to provide you with this service.

Your personal information is handled in accordance with Australia Post's Privacy Policy which outlines how to access and/or correct your personal information or make a privacy related complaint. Any privacy related queries may be directed to privacy@auspost.com.au.

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Promo code TRAVINS16

*Offer available until 31/10/2015 not available in conjunction with any other offers. Insurance issued by Great Lakes Reinsurance (UK) PLC, ASFL 318503



TRAVINS16

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*Promotional period 5:01pm 31 Jul 2015 to 5pm 31 Oct 2015. Terms and conditions apply and are available at lifestylesurvey.com.au

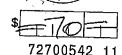
> NSW Permit No. LTPS/15/05591 ACT Permit No. TP15/06704

22/09/15 06/72874 6KM/6 507549 16:40

POST BILLPAY ASK WHICH BILLS YOU CAN PAY PURCHASER'S RECEIPT

AUSTRALIA

Pee \$ 8



HEF OF STAFF

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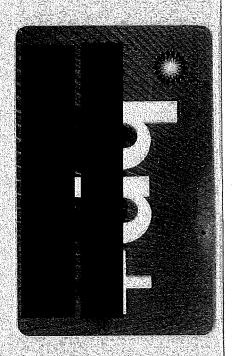
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Telephone 08 – 8226 2699
Send the completed form to:
Shared Services SA
DTF Accounts Payable

Vendor (name and address)		Date of purchas	. 12
STEVEN MARSHALL		<u> 21 </u>	8
Description of goods or services		Total Incl.	GST
PURCHASE OF FUEL FOR REMUNERATION VEHICLE		\$ 81.25	
- 21/02/2018		\$	
		<u> 1111. () </u>	
Vehicle registration and adometer reading — for pool car use	Taran Maria	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		\$	
Total pay	ment	\$8125	
	Magraphy Colors	Nasinat <u>i q</u> a milim yangin dalah lib. Nasinati qa	entalati Selektri
Authorisation details			
IMPORTANT: All original documentation must be attached. Attached			
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IMPORTANT: All original documentation must be attached. Attached Certified by (print name) Approved by (print name and title)		ate	
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IMPORTANT: All original documentation must be attached. Certifled by (print name) Approved by (print name and title) BANN 11-11-11 Signature Account details		ate \3/03/20	2.8
IMPORTANT: All original documentation must be attached. Attached Certified by (print name) Approved by (print name and title) Barry Hours Signature Signature Account details Account number Tax code GSTexol, amount	GST	ate 13 / 03 / 20	5). GST
IMPORTANT: All original documentation must be attached. Certified by (print name) Approved by (print name and title) Paul Todarelli - ruana Signature Signature Account details Account number Tax code GST excl. amount		ate \3/03/20	5). GST
MPORTANT: All original documentation must be attached. Certifled by (print name) Approved by (print name and title) Barry Hall Signature Signature Account details Account number Tax code GSTexcl. amount	GST 7 - 3 9	ate 13 / 03 / 20	5). GST



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			\$ 81.25
	Cas	st)	\$ 100.00
	Cha	inge	\$ 18.75
	721 N	11157-	
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