



Australian Government

Comcare

PUTTING YOU *FIRST*

Creditor No

Comcare use only

SUPPLIER DIRECT CREDIT INFORMATION

NOTE: Comcare's payment terms are 30 days from the date a correctly rendered invoice is received, unless otherwise contractually agreed.

SUPPLIER DETAILS

Supplier name

ABN

Postal address

State Postcode

Phone Fax Mobile

Email (for payment remittances)

Contact name

Position

SUPPLIER PAYMENT DETAILS

Account name

Bank

BSB Account number

Name of person supplying above information

Signature

Please email completed form to your Comcare Contact Officer

COMCARE USE ONLY

Details entered by Date

Details checked by Date