


Please fill out the invoice requisition as shown below

		<h2 style="text-align: center;">INVOICE REQUISITION FORM</h2>	
<p>Use this form to request that an invoice be generated for goods or services provided. For information on the details required within this form, refer to the Invoice Requisition Instructions document.</p>			
Date: / /		Customer Code: (To be filled out by Accounts)	
		Invoice No: (To be filled out by Accounts)	
Invoice Details:			
Invoice to:			
Postal Address:			
		Contact Num:	
Attention:			
Details to appear on the invoice:			
General Ledger Details:			
GL	Dept	Product	Project
			\$ (GST excl)
			\$ (GST excl)
			\$ (GST excl)
			\$ (GST excl)
Sub Total:			\$ (GST excl)
GST:			\$
(Either calculate to 4 decimal places OR write n/a for invoices exempt from GST)			
Total:			\$
Authorisations:			
Contact Name:		Contact No:	
HOD / Manager Signature:		HOD / Manager Name Print:	
Department:			

State company name or client with full postal address

This will appear with the details on the invoice

Breakdown the charges whenever possible and code/price accordingly

Must be signed by HOD/ Manager with appropriate delegated authority

To refer to if there are any queries

Once completed, send this form to the Accounts Department