Payment request form

Employee name:

Employer name:

Community Business Bureau

salary packaging | business consulting

cbb.com.au 1300 763 505 customercare@cbb.com.au

Mobile:

	aging new payment or c	hange existing)			
Payment amount:		Once off	Regular payment		
Purpose of (E.g. mortga	payment: age / personal loan)				
Frequency of payment:			Start date:	/	/
-	be made electronically either EFT of BPAY and p	via: provide details for only the	option you choose)		
Bank: Account name:					
EFT	BSB Number:	Account r	number:		
	Reference:				
ВРАҮ	Biller code: BPAY name:	BPAY refer number:	ence		
	(e.g. bank / credit uni	on name)			
Please note:					
▶ The minimur	m payment request is \$5	0.00.			
-	nt Request Form and atta te required/requested.	ched proof of debt must b	e forwarded to CBB at lea	st 5 workin	g days prior to
	•	kaging Card, all payments	will be made on the same	e day as you	ır card.
If your paym	nent contains GST, the m	aximum amount you can sa	alary package this FBT yea	r will be red	uced. To avoid this
occurring Cl	BB recommend making p	ayments for expenses whic	ch do not contain GST.		
Employee signature:			Date:	/	/

Update Details: Please fill out the following to ensure we have the most up to date details in our system

Email:

NCB No.

(office use)

Community Business Bureau