

Your name

Trading Name:

ABN:

Address:

Email:

Phone:

INVOICE

The following numbers must appear on all related correspondence, papers, and invoices:

Date:

Invoice Number:

Purchase Order:

Supplier Number:

Smarty Grants Reference Number:
(EG EFR1-0001)

TO:**CORRECTIVE SERVICES NSW**

Centralised Accounts Payable

PO Box 7065, Sydney NSW 2001

DESCRIPTION (PROGRAM DELIVERED INCLUDING LOCATION AND MODULE ANDOR SESSIONS)	UNIT PRICE	TOTAL
TOTAL		

Payment details

BANK	BSB	ACCOUNT NUMBER	ACCOUNT NAME

1. The Invoice number is generated by the facilitator and needs to be a unique consecutive number (not duplicated)
2. The supplier's invoice must:
 - I. include the supplier's full trading name and ABN;
 - II. include the relevant Purchase Order number;
 - III. refer to one Purchase Order only;
 - IV. be sent to OSPAdmin OSPAdmin@justice.nsw.gov.au;
 - V. be a valid invoice.