

Sample Controlled Money Payment Record

<i>[name of law practice]</i> CONTROLLED MONEY PAYMENT RECORD REQUEST	
Reference Number:	
Controlled Money Account Number:	
Date:	
Matter Reference:	
Client/Person's Name:	
Matter Description:	
Amount:	
Payee:	
If by EFT – Receiving account number (incl BSB):	
If payable to ADI –	BSB: Name of beneficiary:
Reason/Purpose of Payment:	
Clients written instructions for the payment are attached	Y/N
Solicitor/Associate Requesting Payment:	
Authorised By: (Authorised controlled money account signatory/ies):	

Note: A written record of the withdrawal by cheque or electronic funds transfer must be maintained by the law practice for each controlled money account and filed in the order in which the payments were made. The record must be made prior to the withdrawal of controlled money.