Queensland Government
Department of Justice and Attorney-General

ELECTRONIC FUNDS TRANSFER (EFT) REQUEST FORM

Please complete this form and return it to:

State Penalties Enforcement Registry
Customer Response
GPO Box 1387
Brisbane QLD 4001

Fax: 07 3006 9090
Phone: 07 3006 5903
Email: sper@justice.qld.gov.au

THIRD PARTY CREDITOR DETAILS

Party ID

Name

Address

Suburb **State** **Postcode**

Phone **Email**

FINANCIAL INSTITUTION ACCOUNT DETAILS

Name and address of bank, building society or credit union

BSB _

Account Number

(can only be a maximum of nine digits)

Account held in the name of

Nominate how you would like to receive your remittance advice (please tick)

Email **Fax** **Post**

I hereby agree that all payments from SPER are to be made by way of direct deposit to the above account.

Name

Position

Signature

Date

OFFICE USE ONLY

Vendor No.

Entered by: ..... **Checked by:** .....

Date: ..... **Date:** .....