



PAYMENT REQUISITION

PLEASE COMPLETE IN **BLOCK LETTERS** AND RETURN TO:
EMAIL: STRATA@PRECISE.PROPERTY | POST: 48/117 OLD PITTWATER RD, BROOKVALE 2100

Strata Plan: _____

Property Address: _____

Unit Number: _____

Date work was completed: _____

Payment / Reimbursement to: _____

Payee Address: _____

Payee Contact Number: _____

Payee Email Address: _____

Description for payment : _____

Amount: _____

BANK DETAILS

Account Name: _____

BSB: _____ Account Number: _____

DECLARATION

I, _____ (your name)

confirm that the above is true and correct

confirm that Committee Approval has been obtained for this payment request

Signed: _____ Date: _____

SUPPORTING DOCUMENTATION

Copies of tax invoices & supporting documentation MUST be attached including Committee Approval

copies of tax invoices and supporting documentation attached

committee approval attached
