**Changing PlacesPayment Advice**

**Date: Agent:**

**Property:**

**Client:**

**For:**

**Receipt required: Yes / No: □ Mail / Email: □**

**Postal / email address:**

**Additional notes:**

**Order type: In person: □ Mail / Fax: □ Telephone: □**

**Amount: $ (eg 1.00)**

**Card type: MasterCard: □ Visa: □ American Express: □**

**Name on Card:**

**Card number:**

**Expiry date: (mm/yy) / CVC:**

**Signature:**

**Alternatively – Transfer or bank to:**

**Changing Places General Account**

**Commonwealth Bank**

**BSB:** 063 145

**ACC:** 1016 5878

**REFERENCE:** (PROPERTY ADDRESS)

Appendix 3