KOONUNG
Secondary College

SECONDHAND TEXTBOOK SALE – PAYMENT INSTRUCTION FORM/ DIRECT DEPOSIT APPLICATION FORM

Family name (of your eldest child)

Given name (of child)

Parent's email address
(Please print CLEARLY)

Account Details. Please check that these are correct.

BSB Number* | | | | __ | | | |

Account Number* | | | | | | | | | |

Bank Name*

Account Name*
(e.g. John Smith)

_____ _____

Authorising applicant's signature **Date**

Admin Use Only

Actioning Officer _____ Date _____

No. books sold ____ of ____ submitted. **TOTAL PAYMENT $_____**