TE PŪNAHA PŪTEA - Amorangi Accounting System

Accounts for Payment Form

How to use this form:

Please complete all areas of this form as necessary. Refer to 'Chart of Accounts' for Codes.

Attach all invoices/receipts. *Please retain a copy of this form for your records.*

PĀRIHA / MINISTRY UNIT NAME: _____

Creditor/Supplier Name	Account Code * *Refer to 'Chart of Accounts' for codes*	Amount
DIRECT DEBITS/AUTO PAYMENTS:		
NOTES:		$ -

Signed: _____ **Date:** _____