



PROFICIENCY TESTING AUSTRALIA
 A.B.N. 92 074 251 237
P O Box 7507 Silverwater NSW 2128 AUSTRALIA

CREDIT CARD PAYMENTS

Payee	
Client No (if known)	

CARD DETAILS						
Card Type	Visa		Mastercard			
	Diners		American Express			
	Other					
Account Name						
Card Number						
Expiry Date						
Cardholder's Signature						

PAYMENT DETAILS			
Account Numbers			
Invoice Number		Amount	
Other Details (Applications, etc)			

To be returned to: P O Box 7507 Silverwater NSW 2128 AUSTRALIA
 Ph: (02) 9736 8397 Fax: (02) 9736 1288
 Email: pta_finance@pta.asn.au