



You can type into this form before printing

Credit Card Payment

to Eurobodalla Shire Council

Sand your form to:		If you need help:		Office use only	
Send your form to: The General Manager		,			
Eurobodalla Shire Council		Phone us on (02) 4474 1000		Officer	
PO Box 99 Moruya 2537				Receipted amt \$	
(DX 4873 Moruya)				Receipted aint 3	
council@esc.nsw.gov.au		Or Come in and see us at: 89 Vulcan St Moruya NSW		Received date	
Or bring it to:				Receipt No.	
Customer service office					
89 Vulcan St Moruya NSW				Receipt to (code)	
Customer details					
	Ms [Dr Cother	Your Reference:		
It is important that we can contact you if we need more information or if there is a problem with your payment.	Business/ company name				
	Contact name(
	Contact name(s)				
	Postal address				
Please give as much detail as possible.	Daytime phone		Mobile		
	Email address				
P					
Send copy of receipt by Email Post Receipt not required					
Payment details					
Describe what this					
payment is for, so	e can correctly ocate your				
•					
nayment for?					
Please include any					
	evant reference mbers (e.g.				
application					
number)					
Credit Card Details Please note a 1% merchant charge applies when paying by credit card					
Please debit my: Mastercard Ovisa Card (other card types are not accepted at this time)					
Enter Payment Amount: + 1% Merchant Charge Total Payment					
Credit card number: / / / / / / / / / / / / / / / / / / /					
Card expiry date: CVV (3 digits):					
Cardholder's Name:					
Cardholder's Signature:					