



## UPDATE COMPANY DETAILS FORM

**\*Required information**

\*Company Name

\*Employer ID

Company Trading Name (if different to above)

\*ACN / ABN

\*Business Address

Postcode
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Postal Address (if different to business address)

Postcode
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Telephone

Facsimile

Email

Financial Year Month End (e.g. Jun)

**Bank Account Details for Reimbursement**

Account Name	
Financial Institution	
BSB	
Account Number	

\*Name of Authorised Officer

\*Position

\*Signature of Authorised Officer

\*Date

Please email completed form to [admin@coallsl.com.au](mailto:admin@coallsl.com.au) for processing.

**Please Note:** Updated Bank Account Details for Reimbursement require verification of bank details.

Please provide one (1) of the below

- the top of a bank statement with relevant details listed
- **or** a copy of a void bank deposit slip
- **or** bank details on company letterhead signed by an authorised officer.

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