





Please fill in the details below in BLOCK letters, and then ask your bank or financial institution to verify the information you have supplied.

**Name of Bank or  
Financial Institution**  
**Address of Bank or  
Financial Institution Branch**

Number/Street

Town/City/Postcode

Country

**International Bank  
Account Number (IBAN)**

**Name of Account Holder**

**To the Bank/Financial Institution**  
**Bank/Financial Institution Stamp**

We confirm that the customer account can receive deposits through the automated clearing house system and that the account details of the customer are correct.

**Privacy and your  
personal information**

Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services.

Your information may be used by the department, or given to other parties where you have agreed to that, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which the department will manage your personal information, including our privacy policy, at [humanservices.gov.au/privacy](http://humanservices.gov.au/privacy)

**Customer statement**

I have attached a copy of a bank document that shows my bank details, including my IBAN and the name(s) of the account holder(s).

**Customer signature**

Date

**Customer name**

**Customer's Centrelink  
Reference Number**



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