



This form can be completed electronically on screen, printed and submitted. If you choose to print and fill out this form by hand

Use **BLACK PEN** and print within the boxes in **B L O C K L E T T E R S**

**1. YOUR DETAILS**

|                       |  |
|-----------------------|--|
| Family name / Company |  |
| Given names           |  |
| Contact email address |  |
| Contact telephone     |  |
| <b>Postal address</b> |  |
|                       |  |
|                       |  |
| City                  |  |
| Post code             |  |
| Country               |  |

**2. TYPE OF DOCUMENT /SERVICE**

|   |
|---|
| E.g. Passport application or certified copy |
|   |

**3. CREDIT CARD DETAILS**

|  |   |                 |            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|---|-----------------|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <input type="checkbox"/> Visa<br><input type="checkbox"/> Mastercard<br><i>Note we do not accept American Express</i>  | Authorised amount <u>in AUD</u> , incl. postage<br><br>Visit <a href="https://austria.embassy.gov.au/vien/consularpassportfees.html">https://austria.embassy.gov.au/vien/consularpassportfees.html</a> for current fees and <u>insert in field to right</u> → | AUD _ _ _ . _ _ |            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | <b>Card number</b>  |                 |            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> |   |                 |            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |   |                 |            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Card expiry date</b>  |   | /               | <b>CCV</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Cardholder's signature</b>  |   |                 |            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**OFFICE USE ONLY**

|  |     |    |
|--|-----|----|
| CIS Entry  |     |    |
| Family name/Company  |     |    |
| Given names  |     |    |
| Receipt number   |     |    |
| I warrant the cardholder as stated above, authorised a credit card payment as per the receipt number above |     |    |
| The transaction was approved?  | Yes | No |
| Date   |     |    |
| Signature of payment processing officer  |     |    |

Personal information provided to the Department of Foreign Affairs and Trade (DFAT) is protected by law, including the Privacy Act 1988.