

PRIME SAMM BREEDERS SOCIETY OF AUSTRALIA INC

2018/19 PSBS Membership Renewal

ABN 65 206 172 969

TAX INVOICE

Member Name		Flock Number	
Total Amount Paid \$	(GST inc)	Date Paid:	Date of Issue 15 th January 2019

✂ Please retain the above section or make a copy of this form for your taxation records. ✂

Member Name:	Prefix	Flock Number
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***** ALL PRICES BELOW ARE GST INCLUSIVE *****

CALCULATE YOUR 2016/17 PRIME SAMM BREEDERS SOCIETY OF AUST INC MEMBERSHIP SUBSCRIPTION FEE

1	Compulsory Promotion Levy Per ram sold on farm or at public auction Per Ewe per year	_____ @ \$5.00 each _____ @ \$0.50 each	\$ \$
2	Ram Registration or Transfer - \$10.00 each Semen Transfer – per package - \$20.00 each	Quantity = Quantity =	\$ \$
3	Ewe Transfer - \$5.00 each Embryo Transfer - \$20.00 per package	Quantity = Quantity =	\$..... \$.....
4	Export Sales (ie to China) 1. Semen exported – semen package per ram 2. Embryo - per package	_____ @ \$20.00 each _____ @ \$20.00 each	\$ \$
5	Junior Membership (16-25 yrs) - \$55.00	Name:	\$
6	Commercial Membership - \$55.00	Name:	\$
7	Annual Membership - \$330.00 each	Name:	\$
8	Late Fees Late Annual Membership Late Transfer fee for stud rams and ewes	\$50.00 \$5.00 per animal – Number of animals.....	\$ \$
TOTAL			\$
9	PLUS OUTSTANDING MONIES OWED OR LESS ACCOUNT CREDITS		\$
GRAND TOTAL AMOUNT PAYABLE			\$

PLEASE COMPLETE YOUR PAYMENT INFORMATION & RETURN WITH YOUR RENEWAL FORM NO LATER THAN 5 APRIL 2019

PAYMENT METHOD: **EFT TRANSFER** BSB: **085-005** Account No: **24406 9653** Account Name: **Australian Rural Connect**

Please email remittance to arc@adelaideshowground.com.au or record your payment details below:

Date of Payment:..... Reference:

CHEQUE To be made payable to **Australian Rural Connect**

CREDIT CARD Please completed the credit card information below

Card Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	CVV:.....
Expiry:/.....	Card Holder Name:												Signature:				