Complete the section below for the appropriate boxes ticked.

1. Is this the first or only delivery for this Purchase Order?
   - [ ] Yes
   - [ ] No

2. Full Delivery
   - [ ] Yes
   - [ ] No

3. Part Delivery
   - [ ] Yes
   - [ ] No

4. Purchase of Equipment
   - [ ] Yes
   - [ ] No

5. Returned Goods
   - [ ] Yes
   - [ ] No

Reason:

[ ] Other

Certify that this account is correct in respect of:

[ ] Supply

Date

Authorising Signature

School/Area

Suppliers Name

Purchase Order No.

Curtin University
GUIDE TO COMPLETING A DELIVERY ADVICE

The purpose of this Form is to facilitate payment to a Supplier.

Providing there is no variation between delivered order and amount invoiced amount, payment to the Supplier will proceed without any further reference to the originating School or Department. i.e., completion of this Form by the School/Department will authorise payment provided the details on the Delivery Advice agree with the details on the Invoice.

The invoice will only be referred to the origination School or Department for payment authorisation, if there is a variation between the total cost of items delivered and the invoice received.

Use the Boxes provided on the Form to indicate the status of the Delivery. It is possible to tick a combination of boxes.

1. **IS THIS THE FIRST OR ONLY DELIVERY**
   Only tick this box if there have been no previous deliveries for this Order. No tick will indicate that the delivery is for a back order.

2. **FULL DELIVERY**
   Tick this box if the delivery COMPLETES the Order. It is not necessary to include description details of the Order unless items of equipment are included in the delivery.

3. **PART DELIVERY**
   Tick this box if only part of the Order has been delivered. Ticking Box 1 and Box 3 will indicate that it is the FIRST delivery on the order AND also a part of delivery. Ticking only Box 3 will indicate that the delivery is a part delivery of a back order.
   If this Box is ticked it will be necessary to complete the DESCRIPTION details of the Form for the items delivered.

4. **PURCHASE OF EQUIPMENT**
   Tick this Box when item/s delivered are equipment.
   If this box is ticked it is necessary to complete the DESCRIPTION details of the Form for the equipment item/s. Be sure to include the Serial Number.

5. **RETURNED GOODS**
   Tick this Box if any goods received are returned.
   If this Box is ticked, write a brief reason for the return.

PLEASE COMPLETE THE FORM CLEARLY AND ACCURATELY. THIS WILL HELP TO ENSURE MINIMAL DELAYS.