Form 85

To be inserted by Cour	t
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Case Number:

Date Filed:

FDN:

## NOTICE OF PAYMENT INTO COURT

[SUPREME/DISTRICT/MAGISTRATES] Delete all but one COURT OF SOUTH AUSTRALIA [COURT OF APPEAL] If applicable CIVIL JURISDICTION [MINOR CIVIL] If applicable [NAME OF LIST] LIST If applicable

Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.

**First Applicant** 

First Respondent

First Interested Party

Lodging Party		
	Full Name (including Also Known as, capacity (eg Administrator, Li	quidator, Trustee) and Litigation Guardian Name (if applicable))
Name of law firm / solicitor		
	Law Firm	Solicitor

Payment Details Mark appropriate sections below with an 'x'	
Type of payment: [ ] Cash [ ] Bank guarantee [ ] Other [ <i>nature and details</i> ]	
Amount of payment:	
The payment is in respect of:	
The payment is pursuant to: [ ] Court order made on [ <i>date</i> ] by [ <i>judicial officer</i> ] [ ] Act or Rule [ <i>Act and section/rule number</i> ]	
Reason for payment:	