

Authority for Automatic Payments

(Not to operate as an assignment or an agreement)

FOR BANK USE	A/P No	Type	Charge	Bank Int.
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Non Std Com.	Bulk/G.A. Code		Freq. O'ride
	<input type="text"/>	<input type="text"/>		<input type="text"/>

PAYER DETAILS To the Manager

Name of Bank
Branch
Address
Name of Account

IMPORTANT PLEASE TICK

This is a new authority
 OR
 As from _____ (first payment date), this authority replaces existing authorities for \$ _____ in favour of the same payee.

Account details: On behalf of: _____
Name if other than payer: _____

Bank	Branch number	Account number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Details to appear on my/our bank statement.

Particulars	Code	Reference
<input type="text"/>	<input type="text"/>	<input type="text"/>

FREQUENCY AND AMOUNT

First Payment Date	Last Payment Date	OR	Until further notice		
<input type="text"/>	<input type="text"/>		Tick: <input type="text"/>		
Tick Box	Weekly	Fortnightly	Four Weekly	Monthly	Specify other period

Fixed Amount	Amount \$	Amount in Words
<input type="text"/>	<input type="text"/>	<input type="text"/>

Complete if applicable (tick one box only)

Variable First Amount	Amount \$	Amount in Words
<input type="text"/>	<input type="text"/>	<input type="text"/>
Variable Last Amount		
<input type="text"/>		

PAYEE DETAILS Pay to the credit of:

Name of Bank	Branch
<input type="text"/>	<input type="text"/>

Name of account:	Account details
A L - I K H L A S T R U S T	Bank Branch number Account number Suffix
	1 2 3 2 3 3 0 4 5 8 2 2 7 0 0 1

Details to appear on payee's bank statement.

Particulars	Code	Reference
<input type="text"/>	<input type="text"/>	DONATION

AUTHORISATION

- Please make this automatic payment by debiting my/our account
- I/We understand and accept that the Bank accepts this authority only on the conditions overleaf.

Date: _____ / _____ / _____