

PAYER DETAILS

To the Manager

AUTHORITY FOR AUTOMATIC PAYMENTS

(Not to operate as an assignment or an agreement)

X Name of Bank

X Branch

X Address

X 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: _____

X Bank Branch number Account Number Suffix

X _____

Details to appear on my/our bank statement.

X Particulars Code Reference

X SALESPARTNER _____

FREQUENCY AND AMOUNT

First Payment Date / / Last Payment Date / / OR Until further notice Tick:

Tick Box Weekly Fortnightly Four Weekly Monthly Specify Other period

Fixed Amount Amount \$ = 69.00 = Amount in Words Sixty nine dollars only

Complete if applicable (tick one box only)

Variable First Amount _____ Amount \$ Amount in Words _____

Variable Last Amount _____

PAYEE DETAILS

For payment by cheque tick box and complete sections on reverse (leave this section blank)

Pay to the credit of:

Name of Bank: NATIONAL Branch: JOHNSONVILLE

Name of account: COMPUTERS FOR PEOPLE Account details: Bank Branch number Account Number Suffix: 060583 0371945 00

Details to appear on payee's bank statement.

Particulars Code Reference: REAL-EZY PSP _____ FROM _____

AUTHORISATION

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

Name of account—customer to complete (Business/Personal) Delete one

X _____ PLEASE TURN OVER

X _____ X _____ X _____ / / / / / /

(Customer's Signature) (Contact Phone No.) (Date) (Customer's Signature) (Contact Phone No.) (Date)