

# PAYER DETAILS

To the Manager

Name of Bank
Branch
Address
Name of Account

# AUTHORITY FOR AUTOMATIC PAYMENTS

(Not to operate as an assignment or an agreement)

## 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

Details to appear on my/our bank statement.

Particulars	Code	Reference

# 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 \$	Amount in Words
--------------	-----------	-----------------

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 section on reverse (leave this section blank)

Pay to the credit of:

Name of Bank NATIONAL	Branch NELSON
--------------------------	------------------

Name of account: BISHOPDALE THEOLOGICAL COLLEGE	Account details
	Bank Branch number Account Number Suffix 060705 0360364 000

Details to appear on payee's bank statement. COLLEGE

Particulars	Code	Reference
DONATION	121 E	

# 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

PLEASE TURN OVER

(Customer's Signature)

(Contact Phone No.)

(Date)

(Customer's Signature)

(Contact Phone No.)

(Date)