

PAYER DETAILS

AUTHORITY FOR AUTOMATIC PAYMENTS

(not to operate as an assignment or an agreement)

To the Manager

Name of Bank	<p style="text-align: center;">IMPORTANT PLEASE TICK</p> <p><input type="checkbox"/> This is a new authority</p> <p style="text-align: center;">Or</p> <p><input type="checkbox"/> As from .. / .. / .. (first payment date), this authority replaces existing authorities for \$ in favour of the same payee</p>
Branch	
Address	
Name of Account	

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 .. / .. / 20 ..	Last Payment date .. / .. / 20 ..	Until further notice Tick <input type="checkbox"/>
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Tick Box	Weekly	Fortnightly	Four weekly	Monthly	Specify other period
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Fixed Amount	Amount \$	Amount in words
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Complete if applicable (tick one box only)

Variable First Amount <input type="checkbox"/>	Amount \$	Amount in words
Variable Last Amount <input type="checkbox"/>		

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 ASB	Branch Rathbone Street
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Name of account	Bank	Branch number	Account Number	Suffix
C A P R I C O R N L T D	1	2	3	0

