induemoney

Direct Debit Request Form

Indue Limited
ABN 97 087 822 464

Please tick one box:				induemoney A/c Number
☐ Electronic Offerings		Church Name		__ __ __ __ __ __ __ __ __
☐ Electronic Giving		Charity Name		__ __ __ __ __ __ __ __ __
☐ Loan Repayment		Loan number		__ __ __ __ __ __ __ __ __
☐ Fees		Entity Name		__ __ __ __ __ __ __ __ __
☐ Other		Induemoney *Cheq* a/c Name		__ __ __ __ __ __ __ __ __

Request and Authority to debit the Account as detailed below to pay Indue Ltd	**Surname or Company name** _____ **Given names or ABN/ARBN** _____ request and authorise Baptist Financial Services Australia Ltd (BFS) Debit User ID148018 as Agent for Indue Ltd to process any amount Indue Ltd deems to debit or charge you through the Bulk Electronic Clearing System from an account held at the Financial Institution below.
Name of Financial Institution that holds the account	**Financial Institution Name** _____ **Branch/Address** _____
Account details to be debited	**Account Name** _____ **BSB Number** ☐☐☐-☐☐☐ **Account number** ☐☐☐☐☐☐☐☐☐ **Narration:** __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ (Max 18 Characters)
Acknowledgement	By signing this Direct Debit Request I/we acknowledge having read, understood and accept the terms and conditions applying to a Direct Debit Request as set out in the BFS 'Financial Services Guide and Product Disclosure Statement – BFS Non Cash Payment Products'.
Debit commencement	Amount to be debited: $ _____ . The first debit will commence on ___/___/___ and at the following intervals after that: ☐**once off** ☐**weekly** ☐**fortnightly** ☐**monthly** ☐**quarterly** ☐**half yearly** ☐**yearly** ☐**4 weekly** ☐**2 monthly** **(tick as appropriate)** until further notice, or the last debit to be on ____/____/____ .
BFSOnline	Please tick if you require the above account to be used as a predefined external account for BFSOnline Internet account access purposes ☐
Type of Request	Tick one box: ☐ New Authority ☐ Amendment of Authority No:_____ ☐ Cancellation of Authority No: _____

Authorised signatory	Authorised signatory
SIGN HERE	SIGN HERE
Print Name:	Print Name:
Address	Address
Daytime Phone: Date / /	Daytime Phone: Date / /

Office Use Only	NEW Authority Number: _____ Entered by: _____ Date: _____

Form # 814 (26.07.2010)

Baptist Financial Services Australia Ltd ABN 56 002 861 789 as agent for Indue Ltd
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