

ST BARNABAS' GLEN WAVERLEY ANGLICAN CHURCH

PERIODIC PAYMENT AUTHORITY (please fill in the details and present at your bank)

To the Manager,

Bank _____ Branch _____

Address _____ P/Code _____

(see the top of your Bank Statement for this information)

Date _____

Please make the following periodical payment:

	Account Title	Account Number	
Debit	Day/Date Due	Month etc	First Payment Due
Due	of each		/ /
		Amount in Words	<input type="checkbox"/> Final Payment Due / / <input type="checkbox"/> Until Further Notice
Amount	\$		

plus current bank charges for this service in force from time to time and pay the amount less such charges to:

	Account Title/Name	Account Number (if applicable)
Credit	St Barnabas' Glen Waverley Anglican Church	10-8940
Bank & Branch/Address	Westpac Bank - Wales Corner, Melbourne	BSB Number 033-009
Details	Periodic Payment <small>(Reference Number, Type of Instalment, Insurance Premium, Rental etc.)</small>	

I/We understand that the bank accepts this order only upon the following conditions, namely:

- (i) Although the bank will endeavour to effect such periodical payments it accepts no responsibility to make the same, and accordingly the bank shall not incur any liability through any refusal or omission to make all or any of the payments or by reason of late payment or by any omission to follow any such instructions.
- (ii) This order is subject to any arrangement now subsisting or which may hereafter subsist between myself/ourselves and the bank in relation to my/our account or any banking accommodation afforded to me/us.
- (iii) The bank may in its absolute discretion conclusively determine the order of priority of payment by it of any moneys pursuant to this or any other order or cheque which I/we have heretofore or may hereafter give to the bank or draw on my/our account.
- (iv) The bank may at its pleasure terminate this order as to future payments at any time by notice in writing to me/us at the last known address or without notice at any time after being advised by the abovenamed payee that no further payments are required.
- (v) This order will remain effective notwithstanding death, bankruptcy or liquidation of me/us or the revocation thereof by any means whatsoever until notice of such death, bankruptcy, liquidation or revocation is received by the bank.
- (vi) The Bank is under no obligation to debit the account on the days nominated above, and may, at its sole discretion debit the account on any other day after that nominated as the day for debiting the account.

Stamp Duty as applicable

Signature _____ Signature _____

Bank Use Only

Date Received / /

Recorded by (Initials) _____

Checked by (Initials) _____

Reference No. _____