

AUTHORISATION FORM

New Authority Amendment (please ✓ appropriate box)

Part "A" (Parishioner to complete)

Date ____/____/____

I/We authorise the Catholic Development Fund to arrange for debiting the account, as described in the **Direct Debit Request** form with the sum of \$ _____ (*minimum transaction amount \$20.00*).

weekly fortnightly monthly quarterly
(please ✓ preferred option.)

commencing ____/____/____ (allow 14 days)

until ____/____/____

.....
Sign here

.....
Sign here

(For joint accounts, two signatures are required)

Part "B" (Parish to complete)

Date ____/____/____

The above amount to be credited to:

Parish CDF Account No.

Parish CDF Account Name

TG No.

(Thanksgiving Envelope No.)

Parishioner Name

DIRECT DEBIT REQUEST

Request and Authority to debit the account named below to pay the Catholic Development Fund

| | |
|--|--|
| Request and Authority to debit | Surname or Company name _____ Given names or ACN/ARBN (you) _____ request and authorise the Catholic Development Fund (User ID 111860) to arrange for any amount the Catholic Development Fund may debit or charge you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below subject to the terms and conditions of the Direct Debit Request Service Agreement [and any further instructions provided below]. |
| Insert name and address of financial institution at which account is held | Financial Institution Name: _____ Address: _____ _____ |
| Insert details of account to be debited | Name of Account: _____ BSB Number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Account Number: <input type="text"/> |
| Acknowledgment | By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and the Catholic Development Fund as set out in this Request and in your Direct Debit Request Service Agreement. |
| Insert your signature(s) and address | _____ Sign here: _____ Print Name _____ Sign here: _____ Print Name (<i>Sign and print full names. For joint accounts, both names are required. If signing for a company include your capacity for signing, eg. Director.</i>) Address: _____ _____ Date ____/____/____ |

REGULAR ELECTRONIC THANKSGIVING

What is it?

It is an easy way to contribute regularly to the Parish Thanksgiving Programme. Direct debiting allows the Catholic Development Fund (CDF), on behalf of your Parish, to deduct from your account an agreed amount on a regular basis.

Benefits to You and Your Parish

It allows you to keep up to date with your Thanksgiving offering, even when not able to attend your Parish church.

Your Parish benefits through the regular monthly or quarterly income.

Security of Your Transaction

No cash changes hands. There is less cash to handle, thus saving administration time. CDF guarantees confidentiality on behalf of your Parish.

How to Apply

- Complete the attached **Authorisation** form (Part "A") and **Direct Debit Request** form. Sign both forms and return to the Parish office.
- The Parish will complete **Part "B"** and forward all completed forms to CDF (allow 14 days for CDF processing).

Variations

If you wish to alter the amount being transferred or cancel the authority, just advise your Parish.

Normal bank charges may apply, eg. dishonour fees if you have insufficient funds in your bank account.

(You will need to contact your bank or financial institution to establish if your account is suitable for direct debiting to occur. Credit card accounts and Passbook accounts are not suitable for direct debiting with CDF.)