

personal details

member number _____ account number _____
account name _____
contact phone no(s). _____

payment & type details

new payment change details
amount \$ _____ starting date ____ / ____ / ____ until further notice or last payment on _____

payment frequency one off weekly fortnightly four weekly monthly quarterly 6 monthly yearly

electronic fund transfer
account number _____
bsb number _____
reference number _____
account name _____

BPay
biller code _____
customer reference number _____

transfer to another Credit Union SA account

deposit account number _____

loan account number _____
NOTE: I acknowledge that the minimum contractual loan repayments will automatically apply where they exceed the nominated amount.

cheque - name of payee or organisation to be paid

postal address _____
_____ p/code _____
reference _____

sweep (not available for VISA credit card)

retain a minimum balance
minimum balance to retain \$ _____
minimum transfer amount \$ _____
effective from _____

maintain a maximum balance
account balance to maintain \$ _____
effective from _____
transfer funds from account _____

complete details in the 'payment & type details' section above for where excess funds are to be transferred to.

cancel payment

cancel payment to payee _____ amount \$ _____ effective date _____

declaration

I/we acknowledge that I/we have received the Conditions of Use - Electronic & General Access Services relating to the Auto Transfer Authority and agree to abide by these conditions of use.

signature (1) _____ signature (2) _____
date _____ date _____

office use only

accepted by _____ date _____ checked by _____ date _____
loaded by _____ date _____ letter sent (applies to new & cancelled only)