

"Good Shepherd Parish - Mt Isa"

Direct Debit Request

PLANNED GIVING

Date

--	--	--	--	--	--

Please tick one

NEW REQUEST ALTERATION CANCELLATION

I/We

--

Name of customer(s) giving the DDR

Authorise you

DIOCESAN DEVELOPMENT FUND

Name of Debit User

227783

APCA User ID Number

To arrange for funds to be debited from my/our account at the Financial Institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS).

This authorisation is to remain in force in accordance with the terms described in the Planned Giving – Direct Debit Request – Service Agreement (see reverse)

--

Signature of Customer

--

Signature of Customer

Details of Account to be Debited – (all details *must be* supplied)

Name of Financial Institution

--

Account Name

--

BSB Number

--	--

 -

--	--

Branch Name

--

Account Number

--	--	--	--	--	--	--	--

Payment Details

Parish Reference Details

--

(Parish Use Only)

I/We request that you debit my/our account in accordance with our Agreement.

Amount

\$

Frequency of debit

Weekly / Fortnightly / Monthly

(Weekly - each Friday)
(Fortnight - each 2nd Friday)
(Monthly - 20th)

First payment date

--	--	--	--	--	--

Final payment date

Until further notice

Credit Parish Account

034203 420027

(DDF Use Only)

Date Processed

Memo No.

Processed by

--

--

--

Planned Giving

2020

Full Name of Contributor:

Address:

Postal: (if different)

Phone:

Please ensure the name corresponds with the name on the envelope or deduction form.

I wish to support the Good Shepherd Parish Planned Giving as follows:

My pledge will be \$ _____ and I will make contributions as follows:
(please tick) WEEKLY FORTNIGHTLY MONTHLY

The Parish offers four options for your contribution
please tick preferred method of payment

Envelope	<input type="checkbox"/>	An Authorisation Form must be completed for these
Direct Debiting from Bank/Credit Union	<input type="checkbox"/>	
Credit Card	<input type="checkbox"/>	
Pay deduction MIM or Other	<input type="checkbox"/>	

Signature: _____ Date: _____

Privacy Statement: Good Shepherd Catholic Parish Mount Isa observes the Privacy Statement of the Townsville Diocese.

All due care and responsibility will be taken to maintain confidentiality in our recording, storage and disposal of your information provided