



## friends of annecto application (Direct Debit Authority) 2008

To the Chief Executive Officer  
**annecto** nominee incorporated  
81 Cowper Street  
Footscray 3011

Name:

Company Name:

Address:

Email:

Business Phone:

Home Phone:

Mobile Phone:

Are you a current or former member:  Yes  No

Are you a current or former staff member?  Yes  No

I would like to make Direct Debits from my nominated Bank, Building Society or Credit Union account.

Financial Institution.....Branch.....

BSB Number..... Account number 9 Digits max.....

Account holder name.....

Signature of Nominated account .....

Date dd/mm/yyyy.....

I/We authorise **annecto** Nominees incorporated to debit my/our account at the Financial Institution identified above in accordance with the Payment details stated on this form and as per the Service Agreement provided.

I/We acknowledge that the account will be debited on the 28th day of the month (or the next business day) unless a different day for the transaction is agreed.

My preferred transaction day is the \_\_\_\_\_ th day of the month.

**Payment schedule:**

1. Regular debits Debit \$-----,----
2. Debit Frequency Monthly
3. Debit Duration. Continue regular debits until further notice (Minimum ----- payments) or
  - a. Until I have paid \$
  - b. Regular monthly debits

I/we note the advice of the Australian Taxation Office regarding the characteristics of tax deductible donations i.e. that:

- they are made voluntarily
- they do not provide any material benefit to the donor; and
- they essentially arise from benefaction and arise from detached and disinterested generosity

I/we understand that:

- **annecto** reserves the right to decline gifts that may be inconsistent with its mission and values
- the donation, once made, will be under **annecto**'s sole discretion and control
- receipts will be issued in the donor name as indicated above by the donor

Signature:

Date:

**annecto** Nominees Incorporated ABN No. 91 305 082 403 is a Public Benevolent Institution and endorsed as a Deductible Gift recipient as prescribed under section 30 BA of the Income Tax Assessment Act 1997

**Direct Debit Request Service Agreement**

I/We hereby authorise **annecto** Nominees Incorporated ABN (91 305 082 403) to make periodic debits as indicated on the front of this Direct Debit request.

I/We acknowledge that the debit amount will be debited from my/our account according to the terms and conditions of the agreement with **annecto** nominees incorporated.

I/We acknowledge that bank account and credit card details have been verified against a recent bank statement to ensure accuracy of the details provided. The number on your Debit Card is different to the account number as required. If uncertain you should contact your financial institution.

I/We acknowledge that it is my responsibility to ensure that there are sufficient cleared funds in the nominated account by the due date to enable the direct debit to be honored on the debit date. Direct debits normally occur overnight, however transactions can take up to three (3) business days depending on your financial institution. I/We acknowledge and agree that sufficient funds will remain in the nominated account until the direct debit amount has been debited from the account and that if there are insufficient funds available; I/We agree that **annecto** nominees incorporated will not be responsible for any fees and charges that may be charged by your financial institution.

I/We acknowledge that there may be a delay in processing if;

1. There is a public or bank holiday on the day, or any day after the debit date,
2. A payment request is received by **annecto** on a day that is not a Banking business day,
3. A payment request is received after normal **annecto** nominees incorporated cut off times, being 4pm Victorian time, Monday to Friday.

All payments that fall due on any of the above will be processed on the next business day.

I/We authorise **annecto** nominees incorporated to vary the amount of the payments from time to time as provided for within the agreement. I/We authorise **annecto** nominees incorporated to vary the amount of the payment upon instruction from the donor.

I/We acknowledge that **annecto** nominees incorporated is to provide 14 days notice if proposing to vary the terms of the debit arrangements.

I/We acknowledge that any request to stop or cancel the debit arrangements will be made in writing and addressed to the Chief Executive Officer **annecto** Nominees Incorporated 81 Cowper Street, Footscray 3011.

I/We acknowledge that any disputed debit payments will be directed to **annecto** Nominees Incorporated. If no resolution is forthcoming, you are advised to contact your financial institution.

I/We acknowledge that if a debit is returned by/my our financial institution as unpaid, I/We will be responsible for any fees and charges for each unsuccessful debit in addition to any financial institutions charges and collection fees.

I/We authorise **annecto** Nominees Incorporated to attempt to re process any unsuccessful payments.

I/We acknowledge that if specified by **annecto** Nominees Incorporated, set up, variation, SMS or processing fees may apply.

### Credit card payments

I/We acknowledge that **annecto** Nominees Incorporated will appear as the business name for all payments from Credit cards. I/We acknowledge and agree that any disputed transaction will be directed to **annecto** Nominees Incorporated.

**annecto** Nominees Incorporated will retain information about your nominated account at the Financial institution private and confidential unless otherwise required by law. Further information relating to **annecto** Nominees Incorporated Privacy Policy can be obtained by contacting **annecto** Nominees Incorporated on 03 9687 7066.

Credit card fees are a minimum of the transaction fee or the Credit Card fee, whichever is the greater.

I/We authorise

1. **annecto** Nominees Incorporated to verify details of my/our account with my/our financial institution.
2. The Financial institution to release information allowing **annecto** to verify my/our account details.

**annecto** Nominees Incorporated  
81 Cowper Street Footscray 3011  
Phone: 03 9867 7066  
Fax: 03 9687 5621  
[www.annecto.org.au](http://www.annecto.org.au)  
ABN 91 305 082 403

