St Ignatius Catholic School
46 Grove Street, Toowong Qld 4066
Telephone: 07 3371 1094
Email: ptoowong@bne.catholic.edu.au

ARCHDIOCESAN DEVELOPMENT FUND

# DIRECT DEBIT REQUEST (DDR)

Action *(Please tick)* : ☐ New request ☐ Alteration ☐ Cancellation

Student/s Name/s:

## SECTION 1 – DETAILS OF ACCOUNT AUTHORITY

I/We *(Name of Customer/s)*:

Authorise the: ARCHDIOCESAN DEVELOPMENT FUND APCA User ID Number: 062782

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 Direct Debit Service Agreement (see over page).

## SECTION 2 – DETAILS OF ACCOUNT TO BE DEBITED *(ALL DETAILS MUST BE SUPPLIED)*

Name of Financial Institution: Branch Location:

BSB No.: Account No.:

Account Name:

## SECTION 3 – READY RECKONER

For assistance in calculating payment dates using the Ready Reckoner please refer to ADF website link adf.brisbanecatholic.org.au/ready-reckoner

## SECTION 4 – PAYMENT DETAILS *(PLEASE ALLOW 3 WORKING DAYS FOR PROCESSING)*

I/We request that you debit my/our account in accordance with this Agreement and subject to one or more of the following conditions:

Payment Frequency *(Please tick)*: ☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly ☐ Once only

Number of Instalments: Start Payment Date *(dd/mm/yy)*: / /

Amount of: $ Final Payment Date *(dd/mm/yy)*: / / **SCHOOL USE ONLY** A#Number:

## SECTION 5 – AUTHORITY

I/We acknowledge the I/we have read and understood all terms and conditions as outlined in the Direct Debit Service Agreement *(Please tick)* ☐

Signature of Customer: Signature of Customer:

Date: / / 20 Date: / / 20

Credit ADF A/C:: 17923 S16 TOO **OFFICE USE ONLY** School Reference Code: