

ANFIN DIRECT DEBIT FORM, SIMPLY PRINT THE FORM,  
COMPLETE AND SEND IT TO:

**ANFIN**  
**GPO BOX 421.**  
**BRISBANE. QLD 4001**

## Direct Debit Request

Request and authority  
to debit my account

**ST. MARK'S ANGLICAN CHURCH**  
**56 BELLEVUE TCE**  
**CLAYFIELD QLD 4011**

Surname Mr/Mrs/Miss/Ms/Other \_\_\_\_\_  
(please circle)

Given names \_\_\_\_\_

\_\_\_\_\_ ("you")

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_

Parish \_\_\_\_\_

request and authorise **Anglican Financial Services (ANFIN)** (148016) to process the amount specified below through the Bulk Electronic Clearing System from an account held at the Financial Institution below, subject to the terms and conditions of the Direct Debit Request Service Agreement and further instruction that may be provided below.

### Name of financial institution that holds the account

Financial Institution Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

### Details of account and amount to be debited

(Please note that direct debiting may not be available on all accounts)

Account Name \_\_\_\_\_

BSB Number [ ][ ][ ][ ][ ][ ] [ ][ ][ ][ ][ ][ ]

Account number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

The amount to be debited at any one time is \$ \_\_\_\_\_

(amount in words)

The first debit may be made on \_\_\_/\_\_\_/\_\_\_ and thereafter at

weekly  fortnightly  monthly  quarterly intervals

### Privacy request

Your parish needs information about your contribution to help plan its budgets and ministry. By completing this Direct Debit Request you consent to ANFIN advising your parish of your contribution. Tick here only if you do not wish ANFIN to advise your parish of your contribution.

### Acknowledgement and signature of account holder

By signing this Direct Debit Request you acknowledge having read this and understand the terms and conditions under which debit arrangements are made between you and ANFIN as laid down in this Direct Debit Request and in your Direct Debit Request Service Agreement.

Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_



### Office Use Only

Auth No [ ][ ][ ][ ][ ][ ] Op No [ ][ ][ ][ ][ ]

Parish Client Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]