

The Go Purple Foundation NPO 147-289
33 Becquerel street
Vanderbijlpark
1911
016 931 3878

annari@mweb.co.za

BANK DEBIT ORDER INSTRUCTION

Name (Debtor)			
Date			
Address			
Contact number			
Commence date			
Reference number	Principal member initials and ID number		
Debit amount			
Number of	1		12
instalments		1	,

Abbreviated name as registered with the bank: _GOPURPLE

Dear Sirs/Madams

The details of my/our account are as follows:

Bank			
Account holders			
name			
Account number			
Branch name			
Branch code			
Type of Account	Savings	Current	Transmission
Cardholders name			
Card number			
Expiry number			
CVV number		3 digit number	r on the back of card
Card type	Master card	Visa	

This signed Authority and Mandate refers to our contract as dated as on signature hereof ("the Agreement"). I / We hereby authorise you to issue and deliver payment instructions to the bank for collection against my / our abovementioned account at my / our above mentioned bank (or any other bank or branch to which I / We may transfer my / our account) on condition that the sum of such payment instructions will never exceed my / our obligations as agreed to in the Agreement, and commencing on the commencement date and continuing until this Authority and Mandate is terminated by me / us by giving you notice in writing of no less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address indicated above.

The individual payment instruc	tions so authorised to be	issued must be issued and deli	vered as follows
In the event African public holiday, the pa Further, if there are insufficien	that the payment day fall syment day will automation t funds in the nominated a	of each and every month c s on a Saturday, Sunday or re cally be the very next ordinary account to meet the obligation, yment as soon as sufficient fun	cognized South business day. you are entitled
		terms of the Agreement is due or less than the obligation due	
system provided by the South be printed on my bank statem the said payment instruction a payment reference is added to	African Banks and I also tent. Each transaction will and if provided to you sho this form before the issurants which you have with	sed will be processed through understand that details of each contain a number, which must ould enable you to identify the ing of any payment instruction. hdrawn while this authority was	n withdrawal will at be included in a Agreement. A I / We shall not
MANDATE			
I / We acknowledge that all pmentioned bank as if the instru		ed by you shall be treated by by me/us personally.	my/our above-
CANCELLATION			
will not cancel the Agreement	. I / We shall not be enti	nay be cancelled by me / us, so tled to any refund of amounts of unts were legally owing to you.	
Signed at	on this	day of	20
Assisted by:		S OR CREDIT CARD VOUC	HERS
FOR OFFICE USE AGREEMENT REFERENCE This Agreement reference			

(NOTE FOR MERCHANT: Delete credit card fields if you do not want to offer the credit card payment option)