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## A . AUTHORITY

### GIVEN BY:

Name of account holder

Address

Bank Account Details:

Bank Name

Branch name and town

Branch number

Account number

Type of account

Current Cheque

Savings

Transmission

### STARTING DATE:

Date of debit order

25<sup>th</sup> of each month

1<sup>st</sup> of each month

### • Tithe

Amount

End date  
(if applicable)

### • Invest

Amount

End date  
(if applicable)

### TO: Mosaïek

1 Danielle Street

Fairland

2030

1. I/We hereby authorise you to issue and deliver payment instructions to your banker for collection against my/our abovementioned account. The individual payment instructions so authorised to be issued must be issued and delivered as stated above.
2. I/we agree that the first payment instruction will be issued and delivered as stated above. Subsequent payment instructions will continue to be delivered in terms of this authority until the obligations is cancelled by me/us by giving you notice in writing of not less than 30 days and sent by prepaid registered post or delivered to your address indicated above or as per above end date.

## B . MANDATE

I/we acknowledge that all payment instructions issued by you shall be treated by my/our abovementioned bank as if the instructions had been issued by me/us personally.

## C . CANCELLATION

I/we agree that although this authority and mandate may be cancelled by me/us, I/we also understand that I/we can not reclaim amounts, which have been withdrawn from my/our account (paid) in terms of this authority.

## D . ASSIGNMENT :

I/We acknowledge that the party hereby authorised to effect the drawing(s) against my/our account may not cede or assign any of its rights to any third party without my/our prior written consent and that I/we may not delegate any of my/our obligations in terms of this contract/ authority to any third party without prior written consent of the authorised party.

Signed at

on this

day of

**Signature of account holder**

