



Direct Debit Request NOW

Account - Periodical Payments

Member/Client No.	
Name(s)	
Address	
Phone (Home)	
Phone (Work)	
Phone (Mobile)	
Email	

I/We authorise APS Savings Ltd (ABN 21 150 630 694 & AFSLN 405934) to arrange for funds to be debited from my/our account at the financial institution identified below through the Bulk Electronic Clearing System (BECS) and paid to APS Savings Ltd in relation to my 31 Day Notice of Withdrawal (NOW) application attached.

Payment details(Your Financial Institution)

Account Name					
Name of Institution		BSB Number		Account Number	

Term Investment Details

Account Holders Details	
Amount	\$
Amount (In words)	

Signature(s).....Date...../...../.....