



Bartercard New Zealand



Automatic Transaction Deduction Authority

Bartercard New Zealand refers to Bartercard Exchange Ltd.

Date _____

The following is regards to the agreement between

Customers Name/Account Name _____

Customers Card No.

6	0	0	9	1	2	6	4								
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Merchants Name/Account Name SUM-it Accounts Ltd

Merchants Account No.

6	0	0	9	1	2	6	4	0	9	3	4	0	9	3	1
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I, _____ (customer), authorise Bartercard New Zealand to deduct from my trading account, the amount of \$ _____ on a:

- Weekly basis (deducted every Friday)
 - Fortnightly basis (deducted every 2nd Friday)
 - Mid-Month basis (deducted on the 20th of every month)
 - End-Month basis (deducted last working day of every month)
- (*Please tick to indicate which payment you require)
- Is this replacing an existing Automatic Transaction Deduction Authority

a) ~~from _____ through to and including _____
 (month) (year) (month) (year)
 Should either party wish to terminate this agreement prior to completion, written notification by either party is required seven (7) days in advance to ceasing date.~~

b) from _____ on a regular basis and will only cease by written notification by
 (month) (year)
 either party seven (7) days in advance to ceasing date.

Variable First Amount Date to be debited: _____ Amount \$

Customers Account Name _____

Customers Name _____ Customers Signature _____
(Authorised Signatory on Account)

Office Use Only

- | | W | F | M | E |
|----------------------------------|------------------------------|--------------------------|-----------------------------|--------------------------|
| Date going out | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is there a termination date? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No | |
| Is there a variable amount? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No | |
| Has the customer signed? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No | |
| Is this replacing a current ADA? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No | |

Initials