Richmond Road School
Automatic Payment Form

To pay your Richmond Road School donation by Automatic Payment simply fill in the form below and send it to your bank

YOUR BANK ACCOUNT DETAILS

Please enter the details of the bank account you wish to use to pay your donation.

Bank Account Holders Name: _____

Bank Account from which payments are to be made:

Bank	Branch	Account Number	Suffix

Important: Please Tick

☑ New authority

☐ / /

As from this date, this authority replaces existing authorities for $_____ in favour of the same payee

To: The Bank Manager

Bank Name:

Town / City: _____ **Branch** _____

INFORMATION TO APPEAR ON MY / OUR BANK STATEMENT

PAYER PARTICULARS	PAYER CODE	PAYER REFERENCE
RICHMOND	ROAD SCH	DONATION

FREQUENCY AND AMOUNT OF AUTOMATIC PAYMENT

Payment Details:

First Payment Date (DAY MONTH YEAR)	Last Payment Date (DAY MONTH YEAR)	Until Further Notice

FREQUENCY OF PAYMENT

Weekly ☐ Monthly ☑

Quarterly ☐

Amount of Payment

$

Amount in Words

PAYEE DETAILS

Pay to the Credit of:

Name of Bank	Branch
ASB BANK LTD	Corporate Banking

Name of Account	Bank	Branch	Account Number	Suffix
Richmond Road School	12	3011	0757539	000

INFORMATION TO APPEAR ON RICHMOND ROAD SCHOOL BANK STATEMENT

FAMILY NAME	CLASSROOM(S)	
		DONATION

SIGN HERE

Authorised Signature: _____

Authorised Signature: _____ **Date** ____ / ____ / ____

BANK USE ONLY

A / P NO.	TYPE	CHARGE	BANK INT	NON STD COM.	BULK/GA CODE	FREQ O/RIDE