

## **ELECTRONIC PAYMENT**

	Date
From Account  Account No: Term Deposit No.: Account Name:	Authority No:
To Account  Internal Account: or; External Account: Financial Inst. Name:  BSB: Account Name: Lodgment Ref.:	Account Number:
BPay Recipient  Biller Code:  Reference Number:	Biller Name:
Details  Amount:  Frequency:  Start Date:  Please refer to the 'Guide to	W / F / M /Once off  Final Payment Date:  to Banking Services' for the relevant Terms and Conditions relating to Electronic Payments. A transaction fee
may apply each time a pay  Declaration  By signing this declarat	wment is made. Refer to your account terms and conditions for relevant fees and charges.  ion. I/we hereby agree to be bound by the terms and conditions contained in the "Guide to Banking and that Auswide Bank recommends that this guide, including any other information they may give me/us,
	gnatures.  ect to the customer and followed sufficient line of questioning to identify the customer without doubt.  sustomer to confirm the payment details.  Operator No.