

Given by (name of Accountholder): Address:	
Address:	
	
Bank Account Details:	
Branch Name:	
Branch Name and Town:	
Branch Number:	
Account Number:	
Type of Account:	Current (cheque) / Savings / Transmission
Date:	
Contact Number:	
Amount:	R350
To (Name of Beneficiary):	The Fathers Heart Community Development (TFHCD)
Address:	40 Milkwood Street, Fisantekraal 7550
Refer to contract reference number	("the Contract Reference number")
	ue and deliver payment instructions to your Banker for collection against my/our mentioned Bank on condition that the sum of such payment instructions will not differ contract Reference Number.
	sed must be issued and delivered on the date when the obligation in terms of the ndividual payment instruction may not differ as agreed to in terms of agreement.
instructions, and must be provided to identify	issued must carry the contract reference number, included in the said payment the specific contract. The said Contract Reference number should be added to this for t instruction and communicated directly after having been completed.
I/We agree that the first payment instruction v 25th OR 1st of each month. (please circle pref	will be issued and delivered on (date) and thereafter regularly on the ference)
If, however, the date of the payment instructi instruction may be debited against my accou	ion falls on a non-processing day (weekend or public holiday) I agree that the payment unt on the following business day; or
have been paid or until this authority is cance	e to be delivered in terms of this authority until the obligations in terms of the Agreementelled by me/us by giving you notice in writing of not less than the interval (as indicated in istered post or delivered to your address indicated above.
B.MANDATE I/We acknowledge that all payment instruction have been issued by me/us personally.	ons issued by you shall be treated by my/our above-mentioned Bank as if the instruction
C.CANCELLATION I/We agree that this Authority & Mandate ma	ly be cancelled by me at any time through a month's written notice.
D.ASSIGNMENT: I/We acknowledge that this Authority may be third party,	e ceded or assigned to a third party if the Agreement is also ceded or assigned to that
Signed aton this	day of
SIGNATURE AS USED FOR OPERATING ON THE A	ACCOUNT
ASSISTED BY FOR OFFICE USE E.AGREEMENT REFERENCE NUMBER	CAPACITY