



PBO: 930 004 509 NPO: 003 393-NPO Section 18A: RG/0018/04/05

Please Indicate: General once-off Contribution (Credit Card) 500 Club Subscription (Debit Order) 500 Club Subscription (Credit Card)
 General Monthly Contribution (Debit Order) General Monthly Contribution (Credit Card)

| ABBEYFIELD GENERAL DONATIONS BANKING DETAILS | | | | ABBEYFIELD 500 CLUB BANKING DETAILS | | | | | |
|--|--|--------------------------|----------|---|---|---|--|--------------------------------------|--------------------------|
| Account Name | Abbeyfield Society of South Africa (Standard Bank) | | | Account Name | Abbeyfield Society of South Africa (ABSA) | | | | |
| Account Type | Current | | | Account Type | Current | | | | |
| Branch Name | THIBAUT SQUARE | | | Branch Name | | | | | |
| Account Number | 070864071 | | | Account Number | 287015339 | | | | |
| Branch Code | 000909 | | | Branch Code | 632005 | | | | |
| A. Client Name | | | | | | | | | |
| Contact Name | | | | Company Name | | | | | |
| Telephone | | | | VAT # | | | | | |
| Fax | | | | ID Number | | | | | |
| Cell | | | | Email Address | | | | | |
| Postal Address | | | Code | | | Do you require a Section 18A tax certificate? | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Physical Address | | | | | | Code | | | |
| B. Authorisation for Direct Debit Payments | | | | C. Credit Card Authorisation | | | | | |
| Type: | General Donation | <input type="checkbox"/> | 500 Club | <input type="checkbox"/> | Type: | General Donation | <input type="checkbox"/> | 500 Club | <input type="checkbox"/> |
| Monthly Debit | | | | Monthly Debit | | | | | |
| Account Holder | | | | Card Holder | | | | | |
| Bank Name | | | | Card Number | | | | | |
| Branch Code | | | | Expiry Date | | | | | |
| Account Number | | | | Credit Card Type | Visa <input type="checkbox"/> | MasterCard <input type="checkbox"/> | Amex <input type="checkbox"/> | Diners Club <input type="checkbox"/> | |
| Account Type | | | | Security Code (Last four digits on the back of your card) | | | | | |
| <p>I understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and if provided to you should enable you to identify the Donation. A payment reference is added to this form before the issuing of any payment instruction.</p> <p>MANDATE I acknowledge that all payment instructions issued by you for a donation shall be treated by my bank as if the instructions had been issued by me personally.</p> | | | | | | | | | |
| Authorised Signature | | | | Date | | | | | |
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THANK YOU FOR YOUR GENEROUS SUPPORT – FROM THE BOARD AND STAFF OF ABBEYFIELD SA

