



STOP ORDER AUTHORISATION

Victoria Drive (Schoenmakerskop Road)
P.O. Box 5395, Walmer, 6065 | Tel: 041 366 1660/1 | Fax: 041 355 1480
NPO No: 003-538 | VAT Reg No: 4250130434

Please email your completed form to generalmanager@animalwelfarepe.co.za, fax to 0866005880, post to Animal Welfare Society, P.O. Box 5395, Walmer, 6065 or call 041 366 1660 to arrange for the collection of your completed form.

NAME OF INDIVIDUAL

Surname: _____ First Names: _____ Initials: _____

Address: _____

_____ Postal Code: _____

Tel No.: _____ Cell: _____ Email: _____

I, the undersigned, request Animal Welfare Society Port Elizabeth to arrange for the transfer of funds by debit order from the following account:

BANK PARTICULARS

Name of Bank: _____ Branch Name: _____

Branch Code: _____ Account Number: _____

Type of Account: Cheque Transmission Savings Credit Card

Frequency: Monthly Quarterly Half Yearly Yearly

Amount: R _____ Date of Monthly Collection: _____
d d m m y y y y

Signed at _____ on this _____ day of _____

Signature as used for operating on the account

AGREEMENT REFERENCE NUMBER

The agreement reference number is:

AWS-KE _____

WE THANK YOU FOR YOUR KIND SUPPORT