

Electronic recurring payment request

Member name

Member number

From account (eg. (S1))

Service Required (please tick ✓)

☐ New ☐ Alter authority ☐ Cancellation - go to section 'E.' below and complete

For transfer to an EECU Visa Platinum Credit card - go to section 'C.' below and complete

I request EECU to pay, on my behalf the amount of \$

Frequency of payment (please tick ✓)

☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly

Please commence the recurring payments on / / and cease on / / ☐ or when advised

Account details

A. BPAY

Bill code

Bill reference number

B. Internal transfer to another EECU account

Member name

Member number

Account type

Reference

C. EECU Visa Platinum Credit card

Note: Transfer will be made on the 15th of each month

☐ Full closing balance ☐ Minimum repayment ☐ Set amount \$

D. External transfer

BSB number

Account number

Account name

Reference

E. Cancellation

Please cancel the recurring payment made to: for \$ effective / /

Declaration

I/We acknowledge and understand that:

- EECU will process the instructions above and understand that they will not accept responsibility for late or missed payments.
- EECU have the right to cancel this authority at any time by notice in writing.
- I will ensure that funds will be sufficient to meet payments on due dates and that it is at EECU discretion to determine the order of priority for payment.

Signature

Signature (Joint account owner)

Date

Date

EECU Limited

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