

Telephone: 0800 472 329

(Please complete the below form and sent it to customeraccounts@goodmanfielder.com.au)

## **Direct Debit Authority**

Name of my bank account to be debited	Initiators Authorisation Code					:
0	3	2	1	2	თ	1
Name of my Bank	Approved					
Bank Branch Account number Suffix	1132 08/			/11		
Lautherica you to debit my account with the amounts of direct debits from Goodman Fielder New 2	realand	Limito	d with	the out	horicat	ion
I authorise you to debit my account with the amounts of direct debits from Goodman Fielder New 2 code specified on this authority in accordance with this authority until fur			u with	ine aut	norisat	ion
I agree that this authority is subject to:  The bank's terms and condition that relate to my account, and  The specific terms and conditions listed below						
Authorised Signature(s)	Date					
		,	,			

## Specific conditions relating to notices and disputes

You may ask your bank to reverse a direct debit up to 120 calendar days after the debit if:

- · You don't receive a written notice of the amount and date of each direct debit from the initiator, or
- You receive a written notice but the amount or the date of debiting is different from the amount or the date specified on the notice
   The initiator is required to give you written or electronic notice of the amount and date of each direct debit no less than 2 business days before the date of the debit

If the bank dishonours a direct debit but the initiator sends the direct debit again within 5 business days of the dishonour, the initiator is not required to give you a second notice of the amount and date of the direct debit.