



Better Banking for the
ExxonMobil Community

Electronic Periodic Payment Request

Specific personal information is being collected from you when you complete this form. You are not obliged to provide this personal information but without it your request may not be completed. If you wish to access your personal information please contact the Credit Union using the contact details listed on this form.

Member name

Member number

Account type

Service Required (please tick ✓)

- New
 Alter authority
 Cancellation - (go to section 'D.' 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 periodical payments on / / and cease on / / or when advised

Account details

A. BPAY

Billers code

Billers reference number

B. Internal transfer to another EECU account

Member name

Member number

Account type

Reference

C. External transfer

BSB number

Account number

Account name

Reference

D. Cancellation

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

Declaration

I\We acknowledge and understand that:

- EECU Limited (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

Date

Signature (Joint account owner)

Date

EECU Limited

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