

Nepal Health Scholarships, Australia

Resources to build the capacity of Patan Academy of Health Sciences to train health workers from disadvantaged communities
www.nepalhealthscholarships.org.au



Union Aid Abroad – APHEDA

Level 3, 377 – 383 Sussex St, Sydney NSW 2000 Australia
 1800 888 674; +61 (02) 9264 9343, Fx: 9261 1118
 Email: office@apheda.org.au; Website: www.apheda.org.au
 ABN: 76 425 451 089

Authority for debit

ledger 2401

I would like to pledge a **regular** donation of \$ _____ per MONTH

Regular debits will occur on 15th of each month or 15 June annually & may be made by Credit Card (please complete card details below) or Direct Debit (please complete Form DDR overleaf) only.

I would like to make a **one-off** donation of \$ _____ (Cheque, Money Order, Mastercard, Visa only)

as a donation to APHEDA for NHS & PAHS.

Name:

Address:

..... **State:** **Postcode:**

Tel.: (W) (H) (M)

Fax: **Email:**

➤ OPTION A: CREDIT CARD

I / We hereby authorise Union Aid Abroad – APHEDA to debit my / our credit card for the amount stated above in accordance with the Service Agreement (below).

Please debit my: MasterCard Visa Name on card:

Card Number:

Expiry Date: / Signature:

➤ OPTION B: DIRECT DEBIT - Please debit my Bank Account (please complete Form DDR overleaf).

➤ OPTION C: Please find my Cheque / Money Order attached (payable to APHEDA)

Thank you for your support: A receipt from APHEDA will be mailed to you at the above address.
 Regular monthly donations will be receipted at the end of the financial year.

Service Agreement for Recurring Regular Donations

1. For all matters relating to these arrangements, APHEDA Inc will debit the amount stated monthly on the 15th of the month (except if the due date falls on a non-working day or public holiday, the payment will be processed on the next/previous working day or the 15th) until you request in writing to stop or alter such debit arrangements.
2. The Donor shall be aware that account details should be checked against a recent statement from your financial institution. If you are in any doubt, you should check with your ledger financial institution before completing the authority.
3. It is your responsibility to ensure sufficient cleared funds are in the nominated debiting account where the payments are to be drawn.
4. APHEDA Inc will provide not less than fourteen (14) days notice to the customer if they propose to vary any of the debit arrangements.
5. All Donor's records and account details will be kept private and confidential to be disclosed only:
 - (a) to officers of NHS Aust. or PAHS in Nepal to verify fundraising and receipting,
 - (b) at the request of the Donor or financial institution in connection with a claim made to an alleged incorrect or wrongful debt.

[Ledger #2401]



AUSTRALIAN PEOPLE FOR HEALTH, EDUCATION AND DEVELOPMENT ABROAD INC.
 THE HUMANITARIAN AID AGENCY OF THE ACTU



Nepal Health Scholarships, Australia & Union Aid Abroad – APHEDA
Request for debiting amounts to accounts monthly by the Direct Debit System (DDR)

▶ **Customer's Authority**

I / We:

Name of Customer/s giving the DDR

Authorise you:

Australian People for Health, Education & Development Abroad (APCA User ID 062529)

To arrange for funds to be debited from my / our account at the financial institution below as prescribed below through the Bulk Electronic Clearing System (BECS). This authorisation is to remain in force in accordance with the terms described in the Service Agreement (see below).

▶ **Details of the Account to be Debited**

(all details must be supplied)

Name of the Financial Institution

Address of Financial Institution

Name on the Account

—

BSB Number

Account Number

▶ **Donor Details**

Address

Postcode

Telephone

▶ **Payment Details**

I/we request that you debit my/our account in accord with the service agreement

\$

Amount to be debited monthly

▶ **Signature / s**

Direct Debit Request Service Agreement

1. By signing a direct debit request, you have authorised APHEDA Inc. (APCA User ID 062529) to arrange for the specified funds to be debited from your nominated account of the 15th of each month, , (except if the due date falls on a non-working day or public holiday, the payment will be processed on the next/previous working day) until you request in writing to stop or alter such debit arrangements.
2. APHEDA Inc will provide you with fourteen (14) days notice if we propose to vary the direct debit service agreement.
3. If you wish to alter, cancel or defer a debit payment, you must phone us on 02 9264 9343, write to Union Aid Abroad–APHEDA at Level 3, 377 – 383 Sussex St, Sydney, NSW 2000, or email office@apheda.org.au at least three (3) working days prior to the next debit date.
4. It is your responsibility to ensure sufficient cleared funds are in the nominated account where the payments are to be drawn. If there are insufficient funds in your account to meet a debit payment, you are responsible for any fees and/or interest your financial institution may charge you.
5. The donor should be aware that: a) Direct Debiting through the Bulk Electronic Clearing System (BECS) is not available on all accounts; b) Account details should be checked against a recent statement from your financial institution. If you are in any doubt, you should check with your ledger financial institution before completing the drawing authority.
6. All Donor's records and account details will be kept private and confidential, to be disclosed only:
(a) to officers of NHS Australia or PAHS in Nepal to verify fundraising and receiving,
(b) at the request of the Donor or financial institution in connection with a claim made to an alleged incorrect or wrongful debt.