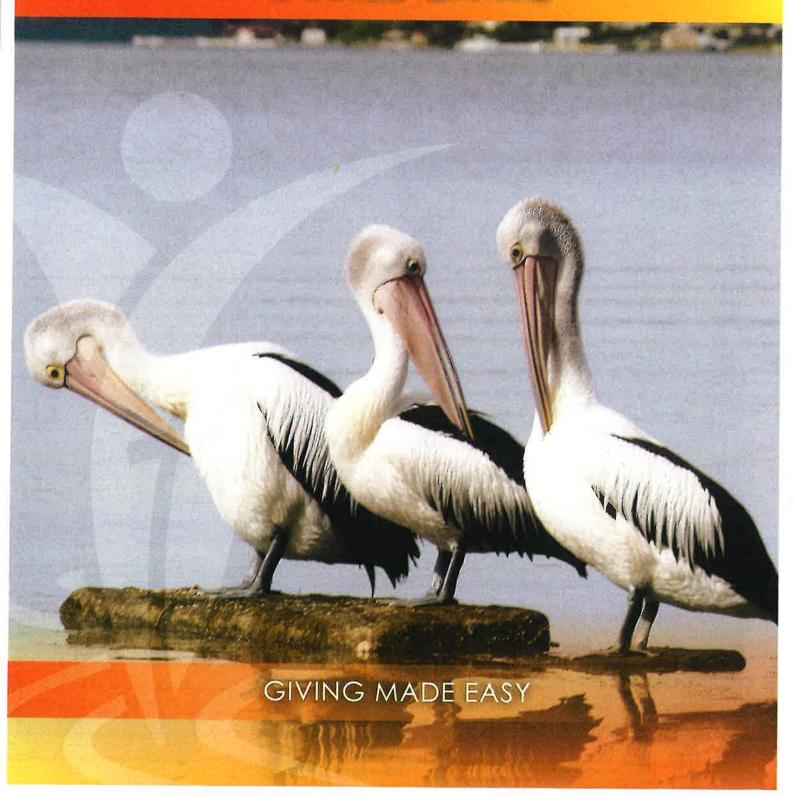


REGULAR ELECTRONIC PLANNED GIVING



NOTES FOR COMPLETION OF DIRECT DEBIT REQUEST FORMS FOR THE CDF

Planned giving contributors must complete the following forms-

1. DIRECT DEBIT REQUEST FORM DDR

BSB number

This is an Australian standard by which every branch of every financial institution can be identified. This number is best checked with your financial institution ie bank, building society and credit union. It is always a six (6) digit number.

Personal account number

Please note that credit card and debit card numbers as they appear on the face of plastic cards can't be used.

The account information required is the actual number of your cheque, savings or access account. Care must be taken in correctly identifying the account to which a debit or credit card may be linked. Account numbers in all instances do not exceed nine (9) digits.

2. APPLICATION TO PAY PLANNED GIVING CONTRIBUTIONS BY DIRECT DEBIT

An important note for parishioners

before returning the completed forms to your parish priest, please ensure the accuracy of the details provided about your personal account and your financial institution. Correct information is essential for the processing of your instructions by the CDF and its banker, the Commonwealth Bank.

Inaccurate information will delay the process and will mean the forms have to be returned to the parish for referral to the parishioner.

If paying by credit card, then only the application form is required.

Please ensure that all forms are signed.

Investments with Catholic Development Fund (CDF) are guaranteed by Bishop William Wright, Bishop of Maitland-Newcastle Diocese and CDPF Limited, a company established by the Australian Catholic Bishops Conference for this purpose. We welcome your investment with the CDF rather than with a profit oriented commercial organisation as a conscious commitment by you to support the Charitable, Religious and Educational works of the Catholic Church. The CDF is not subject to the provisions of the Corporation Act 2001 nor has it been examined or approved by the Australian Securities and Investments Commission. The CDF is also exempt from the normal requirements to have a disclosure statement or Product Disclosure Statement under the Corporations Act 2001(Cth). Neither CDF nor the Trustees of the Roman Catholic Church for the Diocese of Maitland-Newcastle are prudentially supervised by the Australian Prudential Regulation Authority. Contributions to CDF do not obtain the benefit of the depositor protection provisions of the Banking Act 1959. CDF is designed for investors who wish to promote the charitable purposes of the Diocese.



APPLICATION TO PAY PLANNED GIVING CONTRIBUTIONS

Dear Father,			
I/We hereby make application to pay my/our Planned Giving contribution for			
Parish name/suburb			
1. Name			
Address			
Phone			
2. Value of planned giving promise \$(month)	hly)		
3. This authority will commence on//			
4. My Planned Giving Number is			
5. I would like my monthly contribution to be debited			
as per the attached debit request			
OR			
☐ from my credit card			
Please debit my 🔲 Bankcard 🔲 Mastercard 🔲 Visa			
Card Number			
Expiry date/			
/We will advise the parish priest of the cancellation of this authority and will not hold to barish priest responsible for any action arising from my/our not doing so.	the		
Signature Date			
/			
Signature			



Customer's	I/We			
authority	Name/s of parishioner/s giving the DDR			
	of			
	Parish name/suburb			
	authorise you The Catholic Development Fund			
	Diocese of Maitland-Newcastle	025223		
	Name of debit user	APCA user ID number		
	to arrange for funds to be debited from my/our account at the financial institution identified below through the Bulk Electronic Clearing System (BECS).			
	This authorisation is to remain in force in accordance with the terms described in the Application to pay Planned Giving Contributions by direct debit.			
		///		
	Signature	Date		
	Signature	/		
Details of account to be debited (all account	Name of financial institution			
details must be supplied)	Name of tinancial inctitution			
	BSB Account number			
Parish to complete	The payment is for my/our Planned Giving contributions identified by Planned Giving Number			
Please tick the box	☐ I/We request that you debit my/our account in accordance with our agreement			
Agreement	\$			
	Amount to be debited	First payment date		
	The frequency of the debit is once per month. If the direct debit should fall on a weekend or public holiday, it will not be actioned until the next working day.			
	Signed by customer	Signed by customer		