

ELECTRONIC EXTERNAL PAYMENT OVER \$10,000 RTGS PAYMENT REQUEST

Date

Type of Authority

RTGS

EPP OVER \$10,000

A fee of \$20 will be incurred for RTGS Payment Request

Account to be DEBITED at Auswide Bank Ltd

Account Number:

Account Name:

Date of Payment:

Amount:

Lodgement Reference:

Electronic Payment to Account at other Financial Institution

Financial Institution Name:

Financial Institution Branch Location:

BSB: Account No.:

Account Name:

Receipt

Is a receipt required? YES NO

If yes, how would you like the receipt issued? Email Mail

Please note: The receipt will be sent to the address on our system.

Declaration

By signing this declaration, I/We hereby agree to be bound by the terms and conditions contained in the "Guide to Banking Services". I/We understand that Auswide Bank recommends that this guide, including any other information they may give me/us, is read carefully.

Account Signature/s

Branch Use Only

I have checked signatures.

I have spoken direct to the customer and followed sufficient line of questioning to identify the customer without doubt.

I have asked the customer to confirm the payment details.

Branch No.:

Operator No.: