

# auto credit card payment transfer authority

Title: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Surname: \_\_\_\_\_

Member number: \_\_\_\_\_

Current residential address: \_\_\_\_\_

Contact number: \_\_\_\_\_ Email address: \_\_\_\_\_

*The default method of payment for Qudos Bank Credit Cards is via a manual bill payment.  
You can choose to modify this payment option by completing below.*

Commencing on the next due date of my credit card I hereby authorise you to debit the below nominated account each month to cover my Qudos Bank Credit Card repayment.

Please nominate an account: \_\_\_\_\_

Single Savings Account Number: \_\_\_\_\_ OR \_\_\_\_\_ Joint Savings Account Number: (on the same membership)  
\_\_\_\_ 0 \_\_\_\_ 1 \_\_\_\_ 2 \_\_\_\_ 3 \_\_\_\_ QSaver \_\_\_\_\_ 0 \_\_\_\_ 1 \_\_\_\_ 2 \_\_\_\_ 3 \_\_\_\_ QSaver

I wish for Qudos Bank to transfer each month (please select one)

 the full closing monthly balance transfer from my savings account the minimum monthly transfer from my savings account (minimum of 2% of outstanding credit card balance) no debit, manual payment (bill)

I understand that this transfer will take effect every month unless Qudos Mutual Limited is notified in writing of my alteration request.

I acknowledge that there will be a fee charged if my nominated account holds insufficient funds at the time of transfer. Please refer to our Fees and Charges brochure for more information.

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

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