## ANFIN Stop payment form



This form may be lodged by:

Post

GPO Box 421 Brisbane QLD 4001

**Fax** (07) 3835 2299 **Email** askus@anfin.com.au

Helpful hints for completing this application:

- Please allow two business days for your request to be processed.
- Two current Authority to Operate Signatories must sign this form.
- If an Authority to Operate Signatory is new to your organisation they must complete a *Identification and Verification Reference* form and a *Changes to Authority to Operate Signatories* form before they can sign this form.
- An Authority to Operate Signatory is an individual, nominated by an organisation and approved by existing Authority to Operate Signatories, who can authorise ANFIN to initiate transfers, make enquiries and make changes relating to the organisation's ANFIN investments.

Please use BLOCK LETTERS in BLACK OR BLUE PEN ONLY and  $\checkmark$  tick required choices

### **STEP 1 – YOUR DETAILS**

Client name

Client number

Nominate the ANFIN investment you wish to make a stop payment against

#### **STEP 2 – PLEASE TICK OPTION REQUIRED**

Stop cheque (Complete steps 3 and 5)

Stop direct debit (Complete steps 4 and 5)

#### **STEP 3 – CHEQUE DETAILS**

Date on cheque	Cheque number	Cheque amount	Payee details		
STEP 4 – DIRECT DEBIT DETAILS					
Supplier name					

Date of last direct debit

Amount of last direct debit

Frequency of direct debit

U Weekly

Fortnightly Monthly



# **STEP 5 – AUTHORISATION AND ACKNOWLEDGEMENT OF INVESTMENT HOLDER OR AUTHORITY TO OPERATE SIGNATORY**

By signing this form, I acknowledge that I have been provided with, and have read and understood, the ANFIN Terms and Conditions. The Terms and Conditions may be viewed at any time by visiting www.anfin.com.au and clicking on 'Resources'.

I/we the Authority to Operate Signatories of the investment, authorise these instructions.

Investment Holder or Au	uthority to Operate Signatory 1	Investment Holder or Authority to Operate Signatory 2	
Dript full pages		Drint full norma	
Print full name		Print full name	
Date	Client number	Date	Client number
Office Use Orbi			
Office Use Only Urified Authority to O Verified investment ho	perate Signatory 1 and 2 older signatory		
<ul> <li>Cheque search preformed</li> <li>Stop cheque in system</li> <li>Stop DD in system</li> <li>File electronically</li> <li>Orginal document stored in filing room</li> </ul>		RIM         DATE         DOC TYPE: STOP PAYMENT         ACCOUNT	
Processed by:	Date:	REFERENCE	
Reviewed by:	Date:	INITIAL	