

## BANK STOP ORDER AUTHORISATION



**HRF RESIDENTS ASSOCIATION**  
**105 HUNTERS VILLAGE**  
**HUNTERS HOME**  
**KNYSNA**  
**6571**

NAME OF CUSTOMER:

BANK NAME:

TYPE OF ACCOUNT:

BRANCH:

ACCOUNT NUMBER:

BRANCH CODE:

PAYMENT FREQUENCY:

**MONTHLY**

AMOUNT:

AMOUNT IN WORDS:

FIRST PAYMENT DATE:

EXPIRY DATE:

**UNTIL CANCELLED**

DONOR REFERENCE:

**BENEFICIARY DETAILS**

CLIENTS SIGNATURE:

BENEFICIARY NAME:

**HRF RESIDENTS ASSOCIATION**

BANK NAME:

**STANDARD BANK**

BRANCH NUMBER:

**050314**

ACCOUNT NUMBER:

**086032119**

CLIENTS SIGNATURE:

DATE:

**When completed, please pass to your own bank for activation and also send a copy to [info@hrfra.co.za](mailto:info@hrfra.co.za) for accounting purposes.**

FOR BANKS USE / REFERENCE:

DATE INPUTTED: