

DATE (MM/DD/YYYY)

BANK NAME

BANK ADDRESS

Dear Sir/Madam

Re: ACCOUNT DEBIT AUTHORISATION FOR PROVEN ROCK APPROVED RETIREMENT SCHEME

NAME AS IT APPEARS ON THE ACCOUNT	
ACCOUNT #	ACCOUNT TYPE
BRANCH	

This is my authorisation for the monthly deduction of [] from my account, stated above, to be made on the ___ day of each month or any subsequent date following a failed attempt to make the aforementioned deduction. This amount represents contributions to my PROVEN ROCK Approved Retirement Scheme account, and should be remitted to PROVEN Wealth Limited each month via direct credit to:

BANK NAME	BRANCH	ACCOUNT #
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Debits from my account are to commence in the month of _____ 20__ .

Sincerely,

MEMBER'S SIGNATURE



BANK ACCOUNT DEBIT AUTHORISATION