# Electronic deposit alteration

## What are your personal details?

### First account holder

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss Other | Member no.

First names | Surname

Street no. & name

Suburb | State | Postcode

Home phone | Work phone | Mobile phone

Email

### Second account holder

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss Other | Member no.

First names | Surname

Street no. & name

Suburb | State | Postcode

Home phone | Work phone | Mobile phone

Email

## What alteration do you need?

What are the details of the financial institution from which the electronic deposit is to be made?

BSB no | Bank | Branch

Account name | Account no. | Date to make change from

Please alter the electronic deposit as follows (tick one):

- ☐ Cancel payment and electronic deposit authority. (A new electronic deposit authority form will be required prior to accessing this service again by internet banking)
- ☐ Cancel the electronic deposit but not the authority. (This will allow payments to be sent using internet banking in the future)
- ☐ Change electronic deposit date to commence on date provided above and continue at current frequency for all future payments
- ☐ Change the next electronic deposit date to date shown above and then revert to original instructions on
  Date
- ☐ Change frequency of electronic deposit to: ☐ one off ☐ weekly ☐ fortnightly ☐ monthly ☐ four weekly ☐ two monthly ☐ quarterly ☐ half yearly ☐ weekly
- ☐ Change amount of electronic deposit from
  $ to $

## Please sign below in black pen only

All persons named on the account held at the other financial institution shown above must sign below.
Refer to the Fees and charges brochure for details on fees and charges.

### First account holder

Signature | Date

### Second account holder

Signature | Date

**Office use only**

Member no

Operator no

Date actioned

Sig verified by

## Returning this form

Teachers Mutual Bank Limited, Reply Paid 7501 Silverwater NSW 2128

(02) 9704 8203

paymentservices@tmbl.com.au