



DEBIT ORDER INSTRUCTION

(Name of Client):
PBag/Box:
Account Number (to be debited):
Bank and Branch name:.....
Date:.....

Contract Agreement dated:.....
Name of Bank Account Holder:
Bank:
Branch Name:
Account Number: Type: Current/Cheque/Savings

I/We hereby request ,instruct and authorize Bank Gaborone to draw against my/our account with the abovementioned bank(or any other branch to which I/ we may transfer my/our account) the sum of P.....(amount in words).....“the amount necessary for investment in respect of the abovementioned agreement” before the end of every month commencing onuntil(which should be 12 months period).

I/We understand that the withdrawals hereby athourised will be processed by computer. This authority may be cancelled by me/us giving you thirty (30) days notice in writing, sent and delivered to the offices of Bank Gaborone.

Receipt of this instruction by you shall be regarded as receipt thereof by/our bank (which it is or will be).I/We understand that if any direct debit paid which breaks the term of this instruction, Bank Gaborone will make refund upon application.

Should there be insufficient funds in my account at the time of debit, I/we acknowledge that my /our account will remain in arrears and I/we will be responsible for paying the outstanding debt immediately.

Signed at On theday of.....20.....

SIGNATURE AS USED FOR SIGNING CHEQUES

- 1. CAPACITY (a/c holder, director, proprietor,etc.)
Signed
2. Signed (if second signatory required)