

# LENASIA SOUTH MUSLIM ASSOCIATION

NPO Registration Number: 034-986-NPO PBO Reference No: 930009732 Section 21 CO REG Number: 2003/003069/08

Est. 1981

2733 Flamingo Street  
Lenasia South  
P.O. Box 1451  
Kiasha Park, 1829  
Tel: 011 855 4128  
011 855 4871

## DEBIT ORDER INSTRUCTION (LILLAH ONLY)

<b>Personal Details:</b>
Name & Surname:
Address:
Cell Phone Number:
Email Address:
Date of first Debit Order:

Dear Sir/Madam

<b>Bank Details:</b>
Name of Account Holder:
Bank:
Branch Name & Town:
Branch Code:
Account Number:
Type of Account:

I, the undersigned, authorize and instruct **LENASIA SOUTH MUSLIM ASSOCIATION** to debit my bank account, as specified above, on the due date with the total amount payable on a monthly basis.

R \_\_\_\_\_

I understand that the withdrawal hereby authorized will be electronically generated and I also understand that the details of the withdrawal will be printed on my bank statement.

I agree to pay any charges relating to this debit order instruction.

I may cancel this authorization/instruction by notifying **LENASIA SOUTH MUSLIM ASSOCIATION**, giving 30 days (Thirty Days) notice in writing. However, I understand that I shall not be entitled to any refund which were withdrawn/processed whilst this authorization in process.

Signed at: \_\_\_\_\_ On the \_\_\_\_\_ (Day) of \_\_\_\_\_ (month)  
\_\_\_\_\_ (Year)

Kindly forward a copy to [accounts@lsma.org.za](mailto:accounts@lsma.org.za)