

Direct Debit Authorisation 直接付款授權書

Please complete and return this form to your banker or to the party to be credited
請依次填寫並將此授權書交給 貴戶之往來銀行或收款之一方

Name of party to be credited (The Beneficiary) 收款之一方 (受益人)	Bank No. 銀行編號	Branch No. 分行編號	Account No. to be credited 收款賬戶之號碼
Hong Kong Vipassana Meditation Centre Ltd.	0 1 5	5 1 4	6 8 0 1 8 5 8 3

I/We hereby authorise my/our below named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below.

I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s).

I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorisation at any time on one week's written notice.

This authorisation shall have effect until further notice or until the below written expiry date (whichever shall first occur).

I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect.

本人(等)現授權本人(等)之下述銀行，(根據受益人不時給予本人(等)銀行之指示)自本人(等)之賬戶內轉賬予上述受益人。惟每次轉賬金額不得超過以下指定之限額。

本人(等)同意本人(等)之銀行毋須證實該等轉賬通知是否已交予本人(等)。

如因該等轉賬而令本人(等)之賬戶出現透支(或令現時之透支增加)，本人(等)願共同及各別承擔全部責任。

本人(等)同意如本人(等)之賬戶並無足夠款項支付該等授權轉賬，本人(等)之銀行有權不予轉賬，且銀行可收取慣常之收費，並可隨時以一星期書面通知取消本授權書。

本授權書將繼續生效直至另行通知為止或直至下列到期日為止(以兩者中最早之日期為準)。

本人(等)同意，本人(等)取消或更改本授權書之任何通知，須於取消/更改生效日最少兩個工作日之前交予本人(等)之銀行。

My/Our Bank Name and Branch 本人(等)之銀行及分行之名稱		Bank No. 銀行編號	Branch No. 分行編號	My/Our A/C No. 本人(等)之賬戶號碼
My/Our A/C Name as recorded on Statement/Passbook 本人(等)在結單/存摺上所記錄之賬戶名稱		My/Our Address 本人(等)之地址		
Limit for Each Payment 每次付款之限額 \$	Expiry Date (See Notes Below) 到期日(請參閱下列附註) D D M M Y Y Y Y	My/Our Signature(s) 本人(等)之簽名		
Name of Debtor if other than Account Holder 債務人之姓名(如非賬戶持有人)				
Debtor's Reference (Compulsory field - See Notes Below) 債務人參考(必填之欄-請參閱下列附註)		Date 日期		
Bank Use Only 以下由銀行填寫				Signature Verified

NOTES:

- If the amount of your payments are likely to vary each time, set the limit for each payment at the maximum amount you would expect to pay at any one time.
- This Direct Debit authorisation will be cancelled automatically on the date included in the box marked 'Expiry Date'. If you wish the Direct Debit Authorisation to have effect indefinitely (or until cancelled by you) please leave box blank.
- Please ensure that you sign the form in the usual way that you would sign on your Bank Account.
- In the box marked 'Debtor's Reference' enter the identifying reference between yourself and the party to be credited i.e. student number, mortgage agreement number, rental agreement number, etc.

附註:

- 如 台端付款之數額每次可能不相同，則請將最高者定為每次付款之最高限額。
- 本直接付款授權書將於「到期日」一欄中所填寫之日期自動撤銷。如 貴戶意欲本直接付款授權書無限期有效(或直至 貴戶予以撤銷為止)，則請將該欄留空。
- 請保證 貴戶在此授權書內之簽名，與銀行賬戶所簽者完全相同。
- 在債務人之參考欄內，請將 貴戶與受款一方之關係，略予說明，例如學生編號，抵押合約號碼，租賃合約號碼等。

香港內觀靜坐中心有限公司
HONG KONG VIPASSANA MEDITATION CENTRE LIMITED

(Non-profit making organization exempted from tax under section 88 of the Inland Revenue Ordinance)

Postal address: Box 5185, GPO, Hong Kong. 香港中央郵箱 5185 號

Tel : (852) 26717031 Fax : (852) 8147 3312

I, _____ would like to make a monthly donation of HK\$ _____
for Hong Kong Vipassana Meditation Centre for the Development of new centre - Dhamma
Mutta

我 _____ 願意每月捐款 港幣\$ _____
給香港內觀靜坐中心，作為興建新中心「法之明珠」之用。

Here I have enclosed my Direct Debit Authorization Form and give “Hong Kong Vipassana
Meditation Centre Limited” permission to submit the form for my behalf.

附上我的直接付款授權書，並授權香港內觀靜坐中心有限公司代為遞交表格。

簽名 Signature: _____

日期 Date: _____

請郵寄我的年度捐款收據到 Please post my yearly donation receipt to:

名稱 Name: _____

地址 Address: _____

電郵 Email address: _____

電話 Telephone: _____

請郵寄此兩張表格的正本至中心 Please post both **ORIGINAL** forms to the centre:

香港中央郵箱 5185 號 Box 5185, GPO, Hong Kong