



直接付款授權書 Direct Debit Authorization Form

收款人一方 (受益人) Name of party to be credited (The Beneficiary)	銀行編號 Bank No.	分行編號 Branch No.	收款賬戶之編號 Account No. to be credited
University Credit Union	0 1 5	2 5 7	1 0 4 0 0 0 0 2 2

1. 本人/吾等現授權本人/吾等之下述銀行，(根據受益人不時給予本人/吾等銀行之指示)自本人/吾等之賬戶內轉賬予上述受益人。
I/We hereby authorize 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.
2. 本人/吾等同意本人/吾等之銀行毋須證實該等轉賬通知是否已交予本人/吾等。
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.
3. 如因該等轉賬而令本人/吾等之賬戶出現透支(或令現時之透支增加)，本人/吾等願共同及個別承擔全部責任。
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).
4. 本人/吾等同意如本人/吾等之賬戶並無足夠款項支付該等授權轉賬，本人/吾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。
I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, 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 authorization at any time on one week's written notice.
5. 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)。
This authorization shall have effect until further notice or until the below written expiry date (which shall first occur).
6. 本人/吾等同意，本人/吾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天前交本人/吾等之銀行。
I/We agree that any notice of cancellation or variation of this authorization 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/吾等之銀行及分行之名稱 My/Our Bank Name and Branch	銀行編號 Bank No.	分行編號 Branch No.	本人/吾等之賬戶號碼 My/Our Account No.
本人/吾等在月結單/存摺上所紀錄之名稱 My/Our Name as recorded on Statement/Passbook	本人/吾等在月結單/存摺上所紀錄之地址 My/Our Address as recorded on Statement/Passbook		
Limit for Each Payment 每次的付款限額	本人/吾等之簽名 My/Our Signature(s)		日期 Date
	X		
債務人之姓名(若非賬戶持有人) Name of Debtor (if other than account holder)		債務之參考(社員號碼) Debtor's Reference (Membership No.)	
以下由銀行填寫 For Bank Use Only		Signature Verified	

附註 NOTES

1. 請以英文正楷填寫
Please write in Block Letters
2. 請勿使用塗改液或改錯帶塗改內容
Do NOT use correction fluid/ tape for amendment
3. 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。
Please ensure that you sign the form in the usual way that you would sign on your Bank Account.

填妥本授權書後，請交回 貴戶之往來銀行
Please complete and return this form to your banker

聯絡電話號碼：
Contact Phone No. :