

# RTGS Request



**Police & Nurses Limited** ABN 69 087 651 876 AFSL 240701 Australian Credit Licence 240701  
Level 7, 130 Stirling Street, Perth WA 6000 | PO Box 8609, Perth BC, Western Australia 6849  
T 13 25 77 | W [pnbank.com.au](http://pnbank.com.au)

## MEMBER DETAILS

Member number \_\_\_\_\_ Account number to be debited \_\_\_\_\_  
Title \_\_\_\_\_ Surname \_\_\_\_\_ Given name/s \_\_\_\_\_  
Address \_\_\_\_\_  
Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_ Phone number \_\_\_\_\_

## BENEFICIARY DETAILS

Name \_\_\_\_\_  
Address (PO Box not accepted) \_\_\_\_\_  
Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_ Phone number \_\_\_\_\_

## PAYMENT DETAILS

Amount \$ \_\_\_\_\_ Payment date \_\_\_\_\_  
Bank name \_\_\_\_\_ BSB \_\_\_\_\_ Account number \_\_\_\_\_  
Payment Reference / message (optional) \_\_\_\_\_

## AUTHORITY & ACKNOWLEDGEMENT

It is acknowledged that P&N Bank accepts no liability for any delay, mistake or omission which may occur in its transmission, or misinterpretation when received, or failure to identify the payee. Stop payments, enquiries or investigations requested by the member may be subject to additional fees and can be made by contacting P&N Bank on 13 25 77 or at the branch where this transaction occurred.

I agree to the terms of P&N Bank's Privacy Policy and where I have provided personal information about another person (such as a beneficiary), I have made them aware of that fact.

I acknowledge and agree for any fees incurred with this transaction to be debited to the account number above.

I hereby authorise P&N Bank to process this transaction on my behalf and I fully understand and agree to the above.

Signature

Date \_\_\_\_\_

## OFFICE USE ONLY

Officer \_\_\_\_\_ Operator number \_\_\_\_\_ Date \_\_\_\_\_  
Member number \_\_\_\_\_ Member name \_\_\_\_\_ Member debited \_\_\_\_\_

Instructions are signed in accordance with Account  Sufficient funds held in the account