



LEMBAGA PENTADBIR MASJID AR-RAUDHAH
NO 30 BUKIT BATOK EAST AVE 2
SINGAPORE 659919
TEL : 6899 5840 / 63610808 FAX : 65641924

SKIM PINTAR

Penderma Tetap Ar-Raudhah



DIRECT DEBIT AUTHORIZATION

PART 1

PLEASE COMPLETE PART 1 & RETURN THE FORM TO AR-RAUDHAH MOSQUE

To : Name of Bank POSB / DBS / OCBC / UOB / MAYBANK / Others _____		My bank account name :											
My bank account no :		Limit of each payments : \$5 \$10 \$15 \$20 \$50 other \$ _____											
Donor's name :		Donor's address : Blk _____ # _____ - _____											
Poskod _____	email : _____	Donor's Reference No : <table border="1"><tr><td>S</td><td>P</td><td>T</td><td>A</td><td>R</td><td></td><td></td><td></td><td></td><td></td></tr></table>		S	P	T	A	R					
S	P	T	A	R									
Tel no : (H) _____ (HP) _____													

Customer must countersigned any amendments made *Avoid using correction liquid

I/We hereby authorize you to process my DDA to LEMBAGA PENTADBIR MASJID AR-RAUDHAH to debit my/our account each not exceeding the limit indication even though this may result in an overdraft or an increase of the overdraft on my/our account. You are entitled to dishonour such payment and may at your discretion levy a fee should my/our account not contain the necessary funds. You are under no obligation to ascertain the name on the the record of LEMBAGA PENTADBIR MASJID AR-RAUDHAH is the same that provided by me/us and whether or not notice of the bill underlying the debit had been given to me/us.

This authorization shall continue in force until I/we have expressly revoked it by written notice delivered to you. You may in your absolute discretion terminate this agreement by written notice delivered to my/our address last known to you.

_____ Date _____ Signature/Thumbprint*

*For thumbprint, please go to any branch of your bank for verification

Part 2 - For official use

Bank	Branch	LPM AR-RAUDHAH Bank Account No.	Donor's Reference No :
7 3 3 9 5 0 1	8 0 6 3 6 8 0 0 1		S P T A R
Bank	Branch	Account No. To be Debited	

FOR FINANCIAL INSTITUTION'S COMPLETION

To: LEMBAGA PENTADBIR MASJID AR-RAUDHAH
30 Bukit Batok East Ave 2
Singapore 659919

This application is hereby REJECTED (please tick) for the following reason(s):

☐ Signature/Thumbprint# differs from financial institutions record

☐ Account operated by signature/thumbprint#

☐ Wrong account number

☐ Account name differ

☐ Others: _____

_____ Date _____ Name of Bank Office _____