

Baptist Financial Services Australia Ltd

ABN 56 002 861 789 – AFSL 311062
("BFS" and "Baptist Financial Services")
A delegated body of Australian Baptist Ministries

Ph 1300 650 542

Email clients@bfs.org.au

Web www.bfs.org.au



STOP PAYMENT & INDEMNITY (Corporate Cheque, Bank Cheque & International Cheque only)

Stop Payment Request

Please complete the Application, print and sign, before sending it to us via clients@bfs.org.au. Please tick ✓ choice.

I/We would like to report the following Cheque/s have been lost or stolen and have established that the cheque/s remain unpaid. Details of the cheque/s are: Client Number: _____

Corporate Cheque: Serial number: _____ Amount: \$ _____ Cheque issued: _____
(dd/mm/yyyy)
Payee: _____
Please arrange with your banker to Stop Payment, and
 Please issue a replacement Bank Cheque, or
 Refund amount to my BFS a/c No. _____ less any fees or charges

Bank Cheque: Serial number: _____ Amount: \$ _____ Cheque issued: _____
(dd/mm/yyyy)
Payee: _____
Please arrange with your banker to Stop Payment, and
 Please issue a replacement Bank Cheque, or
 Refund amount to my BFS a/c No. _____ less any fees or charges

International Cheque: Serial number: _____ Currency & Amount: \$ _____
Cheque issued: _____ (dd/mm/yyyy) Payee: _____
Please arrange with your banker to Stop Payment, and
 Please issue a replacement International Cheque, or
 Refund to my BFS a/c No. _____ the Australian dollar equivalent of the International Cheque less any fees or charges

Indemnity and Authorisation

In consideration of BFS acting on my/our instructions above, I/we hereby promise and agree to hold BFS and your correspondents indemnified against all actions, claims, suits or demands that may at any time hereafter be made against or on BFS or your correspondents, and I/we further undertake to hand to BFS the lost or stolen Corporate, Bank or International cheque/s should it/they at any time come into my/our hands.

I/We acknowledge having read, understood and accepted the terms and conditions and information about a Stop Payment for a Corporate Cheque, Bank Cheque and International Cheque as contained in our 'Financial Services Guide and Product Disclosure Statement – BFS Non Cash Payment Products'.

Authorised signatory of Account

Authorised signatory of Account

x	x
Name: _____	Name: _____
Date: _____ (dd/mm/yyyy)	Date: _____ (dd/mm/yyyy)
Phone: _____	Phone: _____

Office use only:

Entered by: _____
Date: _____
Time: ____am/pm