



Embracing and Living the Mystery

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**Enabling and empowering children  
with physical and mental disabilities**

## Payment Instructions

### A. Authority

Given by *(name of account holder)* \_\_\_\_\_

Address \_\_\_\_\_

Bank \_\_\_\_\_

Branch and Code \_\_\_\_\_

Account Number \_\_\_\_\_

Type of Account ***(circle applicable account)*** Current / Savings / Transmission

Amount \_\_\_\_\_

Date \_\_\_\_\_

To *(name of beneficiary)* **The Hope Jones Foundation Trust**

Abbreviated Name as Registered with the Bank **The Hope Jones Foundation**

Beneficiary's Address **15 Stanley Street, Richmond Hill, 6001**

I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank (or any other Bank or branch to which I/we may transfer my/our account) on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on \_\_\_\_\_ and continuing until this Authority and Mandate is terminated by me/us by giving you 1 month's notice in writing .

The individual payment instructions so authorised to be issued must be issued and delivered as follows: monthly, bimonthly, three monthly, six monthly, annually, weekly, bi-weekly **(delete that which is not applicable)**

In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the very next ordinary business day. Furthermore, if there are insufficient funds in my account to meet the obligation, you are entitled to track my account and re-present the instruction for payment as soon as sufficient funds are available in my account.:

I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that details of each withdrawal will be printed on my Bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This number must be added to this form in Section E before the issuing of any payment instruction.

IT No. 260/2011



NPO No. 101926



PBO No. 930040401

G Jones D Jones L Nienaber

