



MALAY YOUTH LITERARY ASSOCIATION

PERSATUAN PERSURATAN PEMUDA PEMUDI MELAYU (4PM)

Blk 606 Bedok Reservoir Road, # 01-716 Singapore 470606 | Tel: (65) 62426288
Fax: (65) 62426210 Website: <http://www.4pm.org.sg> | Email: secretariat@4pm.org.sg

Please complete **PART 1** of this form and return to Billing Organisation.

PART 1: For Applicant's Completion (fill in the spaces indicated with in ✓ BLOCK LETTERS)

✓ Date:	✓ Name of Billing Organisation ("BO"): MALAY YOUTH LITERARY ASSOCIATION
✓ Name of Bank/ Finance Company:	✓ Applicant's Name:
✓ Branch:	✓ NRIC No / UEN No:
✓ Inception Date: <input type="checkbox"/> 3 rd <input type="checkbox"/> 13 th <input type="checkbox"/> 27 th	✓ Address:
✓ Amount to be deducted: <input type="checkbox"/> \$5 <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> \$_____	✓ Transaction Type: New Deduction/ Changes for amount to be deducted

Remarks: _____

(a) I/we hereby give consent the use of my/our personal data Malay Youth Literary Association to disseminate information pertaining to Malay Youth Literary Association's programmes and services.

(b) I/We hereby instruct you to process the BO's instructions to debit my/our account.

(c) You are entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for so doing. You may also, at your discretion, allow the debit even if this results in an overdraft on the account and impose charges accordingly.

(d) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through the BO.

My/Our Name(s): _____

My/Our Contact Tel/Handphone No(s): _____

My/ Our account No: _____

My/Our Company Stamps/Signature(s)/Thumbprint(s)*: _____

(as in Bank/Finance Company's record)

*For thumbprints, please go to branch with your identification

Part2: For Billing Organisation's Completion

Bank	Branch	BO's Account No	Application NRIC No:
7 3 0 2 0 1 4 0 4 1 4 0 9 5 6 6 1 3			
Bank	Branch	Account No. to be debited	

Part 3: For Bank/ Finance Company's Completion

To: **MALAY YOUTH LITERARY ASSOCIATION** Name & Address of BO
Blk 606 Bedok Reservoir Road, # 01-716
Singapore 470606

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

- | | |
|--|---|
| <input type="checkbox"/> Signature/Thumbprint #differs from Bank/Finance Co's Record | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Signature/Thumbprint # incomplete/unclear# | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Account operated by signature/thumbprint# | <input type="checkbox"/> Others: _____ |

Name of Approving Officer

Authorised Signature

Date

#Please delete where applicable