

Debit Order : Sophia Gray Bursary Fund

Please Note: Please print and mark with X where applicable.

Donor information																																																																																
ID no:																			or	Student/Alumnus no:																																																												
Title:																				Surname:																																																												
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I hereby authorise the bank mentioned below (or any bank to which I may transfer my account) to debit my account in favour of the UNIVERSITY OF THE FREE STATE, as follows:																																																																																
R																			(rand)																																										
Monthly x					12 months					24 months					Open-ended																																																																	
with effect from:	D	D	M	M	2	0	Y	Y	For office use:	to:	D	D	M	M	2	0	Y	Y																																																														
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City/Town:											Branch number:																																																																					
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<p>Please use this format for reference:</p> <p>Chosen [campaign reference] (see below), [initials and surname] or [student] or [staff number]</p> <p>Examples:</p> <table border="1"> <thead> <tr> <th colspan="3">Campaign</th> <th colspan="10">Your reference</th> </tr> </thead> <tbody> <tr> <td>S</td><td>G</td><td>F</td> <td>J</td><td>R</td><td></td><td>S</td><td>M</td><td>I</td><td>T</td><td>H</td><td></td><td></td><td></td><td></td> <td>Full initials and surname (as on ID) or</td> </tr> <tr> <td>S</td><td>G</td><td>F</td> <td>2</td><td>0</td><td>1</td><td>7</td><td>0</td><td>0</td><td>0</td><td>2</td><td>0</td><td>7</td><td></td><td></td> <td>Student number or</td> </tr> <tr> <td>S</td><td>G</td><td>F</td> <td>0</td><td>8</td><td>6</td><td>1</td><td>1</td><td>1</td><td>1</td><td></td><td></td><td></td><td></td><td></td> <td>Staff number</td> </tr> </tbody> </table>															Campaign			Your reference										S	G	F	J	R		S	M	I	T	H					Full initials and surname (as on ID) or	S	G	F	2	0	1	7	0	0	0	2	0	7			Student number or	S	G	F	0	8	6	1	1	1	1						Staff number	<p>REMARKS:</p> <ul style="list-style-type: none"> Each deduction will be shown on your bank statement. The banking costs will be borne by the donor. You may cancel the above authorisation by giving thirty days' prior written notice. Your tax exemption certificate will be sent to you as soon as possible after the end of the tax year. 				
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Institutional Advancement

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