

Commercial Card - Cardholder Maintenance Form

Complete this form each time you want to transfer a credit balance, transfer funds incorrectly credited to a card, transfer a card to another reporting level or reissue a card for a Commercial Card Product.

Organisation Name	Facility Number
Cardholder Name	Card Number
Cardinoider Name	Card Number
Continual Transfer of Credit Polones	
Section 1 - Transfer of Credit Balance.	
If a card has been cancelled and the card has a remaining crebalance to a nominated account.	edit balance, complete the details below to transfer the remaining
Account Name	BSB Account Number
Section 2 - Transfer Funds incorrectly Credited to a	Card.
If funds have been credited to a card in error, complete the d	etails below to transfer the funds to a nominated card number or
BSB and Account Number.	
Date of Credit Amount	
/ / \$	
Where are the funds to be transferred to?	
16 Digit Card Number Car	dholder Name
	OR
Account Name	BSB Account Number
Section 3 - Transfer Card to Another Reporting Leve	ı.
Please complete this section if you would like to transfer an e	
New Reporting Level Name and or Number	
New Reporting Lever Name and or Namber	
Section 4 - Reissue Card.	
Is the card being reissued due to a name change?	∟No
If ${\bf 'YES'}$ original documentation of the name change must be of the card.	provided to a Westpac branch prior to requesting the reissue
Note: • If the card is being sent to the Company it will be se	ent to the nominated business address.
BSB/Branch Name or Company Address	

Section 5 - Cancel Individual Cards.

List below the cards that you would like cancelled. Please provide a BSB and Account number for any remaining credit balance to be transferred to.

If there is a debit balance on the card a direct debit will be completed at the end of the statement cycle. Please cancel any existing standing authorities on the card(s).

Have all cards listed below been collected from the cardholder and destroyed? \square Yes \square No

If 'NO' please collect all cards listed below and destroy prior to sending this request.

Cardholder Name	Card Number	Account Name, BSB and Account Number for Credit Balance

Section 6 - Authorisation.

This form must be signed in accordance with the current authorisation held by Westpac. Westpac will not act on these instructions unless the signatories are authorised to do so under the current authorisation held by the Bank. This form is to be signed by:

- **Company:** Two Directors or a Director and Company Secretary
- **Trust:** Trustee if a Company (see above) or by an Individual Trustee
- **Association:** in accordance with Minutes of Meetings or other authority
- Partnership: Two Partners or other authority

OR Authorised Signatory(ies)

To be signed in accordance with the instructions provided by the Organisation at establishment of the facility.

Signatory 1.		Signatory 2.	
Name		Name	
Position/Title		Position/Title	
Signature X	Date / /	Signature X	Date / /
If this form is signed by Authorised S Alternatively please return the signed	d form to your Westpac re		
Westpac Use Only (Load to CC) Westpac representative is to verify so by Director/Secretary.		the form has been signed	in terms of authority held if signed
Westpac Representative Name		Signature	
		X	
Phone	Salary Number	L	Date
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