Momentum Office Park
142 Western Service Rd
Cypress Place South, 2128
P.O. Box 659, Witkoppen, 2068
Tel 0867 277 277
Fax 0866 700 010

Fax2Email (Pty) Ltd
Registration No 2003/014451/07

DEBIT ORDER INSTRUCTION

From: (Name of Debtor) _____
(Address) _____
_____
_____

To: FAX2EMAIL (PTY) LTD
142 Western Service Road,
Momentum Office Park, Cypress Place South
Woodmead, 2128

Dear Sirs

AGREEMENT DATED _____
The details of my/our bank account are as follows:

BANK _____

BRANCH NAME AND TOWN | | | | | | | |

BRANCH NUMBER

ACCOUNT NUMBER | | | | | | | | | | |

TYPE OF ACCOUNT CURRENT (CHEQUE) / SAVINGS / TRANSMISSION
(Delete Where Not Applicable)

We hereby "instruct and" authorise you to draw against my/our account with the abovementioned bank (or any other bank or branch to which I/we may transfer my/our account) the amount necessary for payment of the monthly installment due in respect of the abovementioned agreement on the **1st** day of each and every month commencing on _____ and continuing until termination of our agreement or until cancelled by me/us in writing. All such withdrawals from my/our bank account by you shall be treated as though they had been signed by me/us personally.

I/we understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement or on an accompanying voucher. I/We agree to pay any bank charges relating to this debit order instruction.

This authority may be cancelled by me/us by giving you thirty days' notice in writing, sent by prepaid registered post, but I/we understand that I/we shall not be entitled to any refund of amounts which you have withdrawn while this authority was in force, if such amounts were legally owing to you.

Receipt of this instruction by you shall be regarded as receipt thereof by my/our bank (whichever it is or will be).

ASSIGNMENT:
I/We acknowledge that the party hereby authorised to effect the drawing(s) against my/our account may not cede or assign any of its rights to any third party without my/our prior written consent and that I/we may not delegate any of my/our obligations in terms of this contract/authority to any third party without prior written consent of the authorised party.

Signed at _____ on this _____ day of _____ 200 ___

_____ _____
Duly Authorised Signature Witness