

**FORM OF REQUEST FOR DEBITING AMOUNTS
TO CREDIT CARD**

The Manager
National Australia Bank Limited
60 Martin Place
SYDNEY NSW 2000

Dear Sir,

I/We (Name in full).....
(Surname) (Given name/s)

request you until further notice in writing to debit my/our Credit Card account described in the schedule below, any amounts which COUNSEL'S CHAMBERS LIMITED may debit or charge me/us.

I/We understand and acknowledge that:

1. The Bank may in its absolute discretion determine the order of priority of payment by it of any moneys pursuant to this Request or any authority or mandate.
2. The Bank may in its absolute discretion at any time by notice in writing to me/us terminate this Request as to further debits.

Please note that all credit card payments will incur a surcharge fee to cover processing costs: 1.75% for VISA and MasterCard's and 1.93% for AMEX.

THE SCHEDULE

*Details of Credit Card to be debited.

Card Type Visa Mastercard Bankcard Amex

Card Number

Name on Card

Expiry Date

/

Verification Code

Signature.....

Date.....

NOTE: For security purposes you are required to provide the Verification Code. The 3 digit number is located on the signature panel on the back of your Visa, Mastercard or Bank card. On American Express, the 4 digit number is located at the front of the card above the credit card number. Please locate this number and provide it in the space provided.