

## Direct Debit Form

Date \_\_\_\_\_

To the manager of \_\_\_\_\_ Bank, Branch \_\_\_\_\_

I, \_\_\_\_\_ owner of the \_\_\_\_\_ account,

Account Name \_\_\_\_\_ Account Number \_\_\_\_\_

Contact Address \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

Wish to request the Bank to make direct debit of my account as described above for the payment of subscription to Aberdeen Asset Management (Thailand) Limited. (hereinafter referred to as the "Company") according to the amount shown in the computer data media which the Bank receives from the Company through its bank (hereinafter referred to as the "Company's Bank"), and to credit such money to the Company's Bank's account.

In the direct debit of my account for the payment of subscription to the Company, should it appear later that Company notifies the Bank is incorrect and that the Bank has already debited my account according to the amount stated in the invoice or data diskette/tape, I agree to claim such amount from the company directly. I hereby waive my right to demand or sue the Bank for its reimbursement of money that has been debited from my account for payment to the Company according to the amount as stated in the invoice or data diskette/tape that the Bank receive from the Company, I acknowledge that the bank will make direct debit of my account only when the fund then available therein is sufficient therefore. In such direct debit of my account, I also waive a notice thereof from the Bank because I will be able to receive details of the transaction from the passbook/Bank statement or confirmation note/official receipt/tax invoice receipt from the Company.

In case the evidential document and the account number mentioned above have been changed for whatsoever reason, this Direct Debit Order shall remain in effect in all respect with regard to the account so changed.

This Direct Debit Order shall be effective immediately as from the date hereof and shall be in full force and effect until it is revoked by written notification to the Bank and the Company within 30 days.

Your Sincerely

Signed x \_\_\_\_\_ Consent Giver

( )

(as given to the Bank)

Please attach copy of Saving Deposit Passbook or Current Deposit Statement with signature.

### For Company

Certified true signature of consent Giver

Signed \_\_\_\_\_

Date \_\_\_\_\_

Aberdeen Asset Management (Thailand) Limited

### For Bank

Examined and found correct

Signed \_\_\_\_\_

Date \_\_\_\_\_

Authorized Signatory of the Branch