ANZ CONSUMER CREDIT CARDS CARDPAY DIRECT CANCELLATION AUTHORITY



CREDIT CARD ACCOUNT DETAILS	
Account Number	Account Name
CARDHOLDER AUTHORITY	
Please cancel my CardPay Direct arrangement for the above account.	
Authorised Signatory Given Name(s)	Authorised Signatory Surname
Authorised Signatory Signature	Date (DD/MM/YYYY)
Note: For this authority to take effect, this form must be received by ANZ at le	east four business days prior to the next due date.
	autonical submission autonical contract autonical c
Email the form to CardsMaintenance@anz.com	
Alternatively, you can provide cancellation authority using one of the following	ng options:
Return completed form (no stamp required) to:	
REPLY PAID 65798 ANZ Consumer Cards	
Locked Bag 10, Collins Street West	
Melbourne VIC 8007	
Call us on 13 22 73 (international callers: +61 3 8693 5077). Hours of	operation available on anz.com
Visit your local branch	