



VODAFONE BILLING AUTHORISATION



Please note: By filling out this form you are giving authorisation to Farm Source to open a new billing account and pay your Vodafone account on your behalf. All original conditions of your Vodafone account will remain the same.

Fonterra Supplier Yes No Fonterra Supplier No:

FARM SOURCE CONTACT DETAILS			
Physical address			
Street name		Suburb	
Number	Postcode	Town / city	
Email	Do you want to opt in to receive communications from Vodafone:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of account holder			
Farm Source Account No. <input type="text"/>			

Existing Vodafone customers please complete the following:			
Vodafone Account Details			
Vodafone account name			
Vodafone account No.		Phone No.	
Mobile phone No.(s)			

If you are transferring to Vodafone, please enter your current mobile provider and account number below			
Existing Provider Account Details			
Current Service Provider		Current Phone Numbers	
Account Number with Current Service Provider			
Plan selection	<input type="checkbox"/> Farm Source Team Mobile Plan		
	<input type="checkbox"/> Office Net+	<input type="checkbox"/> RBI Plan	

I/We _____ hereby authorise Farm Source to charge my monthly Vodafone account to my Farm Source Account. Farm Source reserves the right to cancel or suspend any services if credit limits are exceeded and/or payments are not made by the 20th of the month following purchase and to take reasonable action to recover any outstanding debt.

You now irrevocably authorise Farm Source to pay Vodafone, on your behalf, any amounts billed under this agreement by the due date, even if the amount is disputed by you.

Name of Farm Source Account: _____

Signature of Farm Source Account holder: _____ Date: _____

Print name: _____

Please return this form to:
Farm Source Credit: nzfss.credit@fonterra.com
OR Freepost: Fonterra Farm Source, PO Box 9045, Hamilton 3240, Attn: Credit