

Provet Plus+ Redemption Authority Form

Please complete your details and return to BOQ Specialist
GPO Box 2539, Sydney, NSW, 2001 or fax to 1300 131 400



Products and services are provided by BOQ Specialist - a division of Bank of Queensland Limited
ABN 32 009 656 740 AFSL and Australian credit licence No. 244616 (**BOQ Specialist**).

Please use **BLOCK LETTERS**

Individual/Practice name

(Must be same name as on the application form for a BOQ Specialist One account)

Provet Account number

I/We hereby authorise Provet to debit My/Our Provet Plus account:

1. With the full points balance each month and deposit the cash equivalent into my BOQ Specialist One account; or
2. With a maximum of Points each month and deposit the cash equivalent into my BOQ Specialist One account; or
3. As per separate written instruction given to Provet from time to time.

Please ensure that you read and consider the Provet Plus Terms and Conditions which can be found at
<http://www.provet.com.au/en-au/rewards/provetplus/termsconditions.aspx>.

By signing this redemption form I/We consent to BOQ Specialist providing My/Our BOQ Specialist One account number to Provet for the deposit as authorized above.

Any queries or amendments to this instruction are to be made directly with Provet.

BOQ Specialist will be relying on this authorization and is not liable for any errors in the redemption of points for cash.

If the Practice is a Corporate please ensure the below is signed by 2 directors / or a director and the company secretary / sole director who is also sole company secretary:

Client 1

Client 2

Name

Name

Signature

Signature

X Sign Here

X Sign Here