

Date

To the Manager ofBank

Address of Bank

.....

I/We hereby authorise and request you to debit my/our:

Account Name

.....

Account number: __/__/__/__/__/__/__

With the sum of £.....

(in words).....

.....

and to credit to: St. Columba's Parish Church

Account Number: **09-06-40-70**

Sort Code: **93-86-31**

Payee reference number if applicable.....

First Trust Bank, 306 Upper Newtownards Road, Belfast

Frequency.....

Start Date

Final Payment Date

or until further notice from me/us in writing.

It is understood that the bank shall not be under any liability for damage or loss caused by any omission to make these payments.

Please allow 5 working days' notice prior to first payment.

Name/ Account Title (block capitals):

.....

Signature

Signature.....