

## STANDING ORDER MANDATE

To the Manager

Name of your Bank.....

Address.....

.....

Please pay: Co-operative Bank, 29 Gordon St. Glasgow, G313P

Sort Code: 839125

Account number: 6562760600

For the credit of **RC Diocese of Argyll & the Isles – Lochgilphead**

The sum of the First Payment £ .....

Commencing on (date):..... and thereafter .....every: .....

*Date of first payment*

*Due Date & Frequency*

Until:..... OR \*Until you receive further notice from me /us in writing

*Date & Amount of Final Payment*

\* Please delete as appropriate

Quoting the reference:.....and debit my account accordingly

(It is essential to include this reference information to allow the parish to track receipt of payments, e.g. J. Smith, Gift Aid Reference, or full name )

Please cancel any previous standing order instruction in favour of the beneficiary named above under this reference

Account name to be Debited:.....

Sort Code:.....

Account Number:.....

Special Instructions

.....  
.....

Signature(s): .....

.....

Date: .....

Note:

The bank will not undertake to:

(i) make any reference to Value Added Tax or other

indeterminate element

(ii) advise payers address to beneficiary

(iii) advise beneficiary of inability to pay

(iv) request beneficiary's banker to advise beneficiary of receipt

Note: Please ensure signed in accordance with account mandate