



STANDING ORDER INSTRUCTION

To (name of bank):

Address of bank:

Please arrange to make standing order payments on the following terms: -

Name of payer (Parishioner)

Bank Sort Code _____

Bank Account Number _____

Amount (Figures) _____

Amount (Words) _____

Payment Date _____

Payment Frequency _____
(eg monthly)

Date of first payment _____

Date to stop payments _____
(or say "until cancelled")

Payee Account (Parish): **Archdiocese of St Andrews & Edinburgh The Most Holy Trinity - Fife**

Sort Code **83 33 00** _____

Account Number **19119778** _____

Signed (by parishioner)

Date