

REQUEST TO SET UP A STANDING ORDER (BLOCK CAPITALS PLEASE)

To: The Manager	
Name & Address of your Bank	

Please pay:

Account Name	Carrickfergus Catholic Church Current Account
Bank Name	Danske Bank
Address	P.O. Box 183, Donegall Square West, Belfast, BT1 6JS
Account Number	51077279
Sort Code	95 02 61
IBAN	GB22 DABA 9502 6151 0772 79

The sum of £ ____ - ____ monthly / annually.

Starting on _____ (date) until further notice

and debit my Account No. _____

Reference (Name Only) _____

Name _____

Address _____

Signed _____

Instructions to Remitting Bank - On all credit notifications please quote name of account.

Please forward this top section to your own bank



Please complete the section below and return to the Parish Office in a sealed envelope.

Your Name	Your Address	Envelope Number

The sum of £ ____ - ____ will be debited from my account monthly / annually

Starting on (date) _____

I would like to split the amount in the following way

Weekly Offering Collection (white envelopes) – Parish: £ ____ . ____

Monthly Offering Collection (pink envelopes) – Priests Stipend: £ ____ . ____