

Please forward this form to your own bank.

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 \_\_\_\_\_  
(e.g. monthly)

Date of first payment \_\_\_\_\_

Date to stop payments \_\_\_\_\_  
(or say "until cancelled")

<b><u>Payee Account (Parish):</u></b>	<b>Archdiocese of St Andrews &amp; Edinburgh – R C Archdiocese of St Andrews &amp; Edinburgh St James' Ch</b>
Sort Code	80-09-55
Account Number	00778079

Signed (by parishioner) .....

Date .....