**PARISH OF COALISLAND**

**STANDING ORDER MANDATE**

*This form instructs your bank or building society to make payment direct from your account. Please complete all items in sections 1 to 6 and fill in the sum payable and frequency in section 7 on the form.*

*(Banks and Buildings Societies may refuse to make such payments from some types of accounts).*

 (**Please use block capitals**)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |
| --- |
| **1. YOUR BANK MANAGER****To**: The Manager Bank/Building SocietyAddress \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**2. Name(s) of Account Holder(s)****3. Bank/Building Society Account Number**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |

**4. Branch Sort Code**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **-** |  |  | **-** |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **7. Instruction to your Bank or Building Society**Please pay to **Coalisland Catholic Church** **AIB, Dungannon****Account Number**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **0** | **3** | **0** | **6** | **8** | **0** | **0** | **9** |

**Sort Code**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **9** | **3** | **-** | **8** | **2** | **-** | **3** | **8** |

The sum of **£\_\_\_\_\_\_\_\_\_\_\_\_****Commencing** on the **Every**: month on the same date until further notice.**Please Reference**:  |

 |
| **5. Signature(s):****6. Date:**Name**:** Address: | **Please return completed Mandate to:****Parish of Coalisland****Parochial House****31 Brackaville Road****Coalisland****County Tyrone****BT71 4NH**Thank you  |