



Standing Order

Customer details

Name of payer:.....

Address with postcode: .

.....
.....
.....
.....

Bank name: Branch title:

Bank postal address:

.....
.....
.....

Bank Sort code: - - Bank Account number:

Please make payments as detailed below from my/our above bank account

Organisation to be paid

Name of payee: Franciscan Aid

Bank name: Lloyds Bank plc Branch title: Cheapside

Sort Code: 30 – 91 – 83 Account number: 00187638

Your Reference (*):

Amount in figures: £.....

Amount in words:

Date of first payment:20.....

Frequency of payments (Ω): Monthly/Quarterly/Yearly

Date of last payment (or, until further notice):

Signature(s) of
Customer(s) (**)

	Date	20.....

Telephone number
(if any query)

(Ω) Delete as applicable

(*) Unless a reference has been specified by Franciscan Aid, please insert your **surname & postcode**

(**) NB: If more than one signature is required for debits to your account, please ensure that this form is fully signed by the necessary people

Please send your completed form to:

Anne Lindley TSSF
Treasurer, Franciscan Aid
87 Hemingford Road,
Cambridge, CB1 3BY

Should you require an acknowledgement of your support, please supply your e-mail address or alternatively enclose a stamped addressed envelope.