

Clara Parish

REQUEST FOR A STANDING ORDER

To: The Manager: (Name of Bank) _____
Address _____

You are authorised to set up a Standing Order on my/our account as specified below. My/our account will at all times contain sufficient funds to enable each payment to be effected on the due date.

Signed: _____ Date: _____

Address: _____

Please charge to my/our account

Account No/IBAN

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Bank Sort Code/BIC

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Name of account (i.e. your name):

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Payment account reference no (i.e. your name again):

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Beneficiary name:

Clara Union Sustentation Fund

Beneficiary:

IBAN: IE50 ULSB 9863 5038 6410 37

BIC: ULSBIE2D

Frequency

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Day of month

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Start Date

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Amount

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PLEASE ENSURE ANY EXISTING STANDING ORDER ON MY ACCOUNT TO THIS BENEFICIARY'S ACCOUNT IS CANCELLED.