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

To: The Man	nager	Ţ	
10. 1110 1/141			
Name & Ado	dress of your Bank		
		<u> </u>	
Please pay:	Account Name	Carrickfergus Catholic Church Current Acc	ount
r	Bank Name	Danske Bank	
	Address	P.O. Box 183, Donegall Square West, Belfa	st, BT1 6JS
	Account Number	51077279	
	Sort Code	95 02 61	
	IBAN	GB22 DABA 9502 6151 0772 79	
Starting on and debit my A Reference (Na Name Address	Account No	umber)	
Instructions t	Please	On all credit notifications please quote nar forward this top section to your own bank	ne of account.
Please	complete the sectio	n below and return to the Parish Office in	a sealed envelope.
Your Name	Your Add	lress	<b>Envelope Number</b>
		debited from my account monthly / annually	
I would like to	o split the amount in	the following way	
Weekly Offering Collection (white envelopes) – Parish:			£
Monthly Offering Collection (pink envelopes) – Priests Stipend:			£