

Bank Standing Order Mandate

1. Your Bank Details:

To: _____ Bank Name

Address: _____

Account Name: _____

Sort Code: _____ Account No: _____

2. Please Pay To:

Account Name: KILLEESHIL PARISH NO 1 A/C

Bank: FIRST TRUST BANK

Address: SCOTCH STREET, DUNGANNON

Sort Code:

Account No:

3. Payments Details:

Amount: £ _____ Amount in Words: _____

First Payment Date: Day _____ Month _____ Year _____

Thereafter Due Date: _____

Frequency of Payment (Weekly, Monthly, Yearly): _____

4. Your Details:

Name: _____

Address: _____

Signature: _____ Date: _____

Please return this completed form to:

Killeeshil Parish
Parochial House, 65 Tullyallen Road, Dungannon, Co Tyrone BT70 3AF