

PLEASE COMPLETE THIS FORM IN CAPITAL LETTERS

MONTHLY BANKERS'S ORDER TO HEBRON CHURCH CARLISLE (Charity No. 1132914)

To _____ Bank Plc (Donor's Bank)

Bank Address _____

Please pay Barclays Bank Plc, English Street, Carlisle (Sort Code Number 20-18-47)

For the credit of Hebron Church Carlisle No. 4 Account (Account Number 00453994)

The sum of £ _____ per month until further notice

The first payment to commence on _____

Donor's Bank Sort Code _____

Donor's Bank Account Number _____

Donor's Name and Address _____

Donor's Signature and Date _____

Note – This replaces my previous instruction for £ _____ per month (delete if not applicable)