

New Standing Order / One Off Gift



Please complete ALL of sections 1-9 and 10, IF REQUIRED.

- 1. Your contact telephone number
- 2. To the Manager of (Bank/ Building Society inc. branch if known)
- 3. Please debit the account of..... (Your full name)
- 4. Sort Code

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 5. Account Number

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- 6. With a payment of (In words)
- 7. (In numbers) £

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To recipient: Southampton University Christian Union
 Bank: TSB, London Road, Southampton Sort Code 30-97-80 Account Number 02493362

- 8. Please make this payment (tick) A ONE OFF WEEKLY MONTHLY QUARTERLY
- 9. First / Only Payment Date/...../..... (At least 9 days after today) or first working day afterwards

For recurring payments only, complete this section

10. Final Payment Date/...../..... or first working day afterwards OR Until Further Notice

Signed:

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Date/...../.....