



St. Bryce Kirk

STANDING ORDER AUTHORISATION

To: (Name and address of your Bank) From: (Your name and address)

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.....

Please debit my/our account number..... with the sum of per month payable to St Bryce Kirk.

The first payment is to be made on and on the of each month thereafter until further notice.

PAYMENT DETAILS

Beneficiary's Name **St Bryce Kirk**
Beneficiary's Bank **Bank Of Scotland
PO Box10
Kirkcaldy KY1 3PA**
Beneficiary's Account No **00356308**
Bank Sorting Code **80-16-84**

First Payment of

on

then on the of each month thereafter until further notice.

Your Name

Signature

Date.....