

St Barnabas Hospice Regular Giving Standing Order Form

Please print this form, complete and send it to

St Barnabas Fundraising Office, 12 Cardinal Close, Lincoln, LN2 4SY

ST BARNABAS HOSPICE TRUST

STANDING ORDER

To.....1

Of.....2

Please pay to:

Account No 16564472 at National Westminster Bank, Lincoln Smiths Branch for the Account of

St Barnabas Hospice Trust (Bank Code 60-13-15)

the sum of.....(pounds) (£.....) 3

on the.....200.....4

and the same sum on the same day in each month/quarter/year starting today

and until(month)(year)

Name.....(Mr/Mrs/Miss/Title)

Address.....

.....

Signed.....Date.....

Bank Account Number : :

Bank Sort Code (: :)

Note

1 Insert name of your bank

2 Insert your bank's address

3 Insert the amount that you wish to give

4 Insert date of first payment

When completed the above form should be sent to:

St Barnabas Fundraising Office, 12 Cardinal Close, LINCOLN LN2 4SY

THIS SHOULD NOT BE SENT TO YOUR BANK