

## Please complete all sections of this form in BLOCK CAPITALS

To (Bank											
Name)											
Address											
Post Code											
Account Holder											
(s)											
Address											
Post Code											
Sort Code				Account Number							
Discourse the second of											
Please pay the sum of	£		N	<b>Monthl</b>	<b>y</b> *	Quar	terly*	Ann	ually*		
						is app	-				
Commencing on	а	and thereafter until further notice									
Signature:					Date:						
							,		•		
							/	/			
Please cancel any existing standing order for the above account for:					he	£					
TI D :	1 6:6: 4		•	•		1	<i>.</i>	• -			
	sh Gift A	id Organ			-						
To: HSBC Bank plc,				Parish: OUR LADY OF LOURDES CHURCH ROTTINGDEAN							
69 Pall Mall, London SW	1Y 5EY	1			KOI	IINGL	ZEAN				
Sort Code				Account Number ‡							
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Gift Aid Declaration Number:											

PLEASE RETURN THE COMPLETED FORM TO THE PARISH GIFT AID ORGANISER

Version: September 2020