

Signature



## Bank Standing Order Form for Regular Donations

## Thank you for supporting older people in Norfolk

To set up your regular donation, please complete your account details, sign and send to your bank at your earliest opportunity. Thank you. New Instruction Amendment to previous instruction **Your Gift** (Please circle as appropriate) The sum of:  $\square$ £5  $\square$ £15  $\square$ £25 Other £\_\_\_\_\_ I wish to pay monthly/quarterly/annually Amount in words: With effect from: \_\_\_\_\_/ \_\_\_\_\_/ \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ or until further notice  $\Box$ Until: Please pay to: Lloyds Bank, Gentleman's Walk, Norwich For credit to: Age Concern Norfolk Ltd Sort Code: 30-96-17 Account Number: 03990538 Reference: AUNDonvour first initial and surname (please use your first initial and surname e.g. Michael Smith would be: AUNDonMSmith) **Your Details** (\*Fields marked with an asterisk must be completed) Title:\* First Name\*: Surname:\* Full Home Address:\* Postcode:\* Phone Number: Account to be debited Bank Address Account Name 

Date \_