STANDING ORDER

To the Manager:

Bank:	
Branch:	
Address:	

I/We hereby authorise and request you to DEBIT my/our Account:

(Name of account):			

Sort Code	Account Number	with the sum of:	
		€	*delete if inapplicable*
Frequency:	**MONTHLY**	*OR* *	*(state frequency)*
Beginning Date:		UNTIL FURTHER NOTICE *OR* *	*(End Date)*

and CREDIT the Account of GROSVENOR ROAD BAPTIST CHURCH at

Allied Irish Banks PLC, Rathgar Branch, 9 Terenure Road East, Rathgar, Dublin 6

Sort Code	Account Number	IBAN	BIC
93-10-98	23385080	IE55 AIBK 9310 9823 3850 80	AIBKIE2D

Quoting Reference:

(Include account name)

Signed	Date

It shall be understood that the Bank shall not be under any liability for damage or loss caused by any omission to make these payments.