

LAWRENCE HOME NURSING TEAM

Registered Charity Number: 1076445

Regular standing order form – Please complete in capitals with black ink.

Please complete the form below and return it to the address at the bottom of the page. Once we have received the completed form we will keep a photocopy and send the original standing order form to your bank so that they can process payments.

Your name & address:
.....
.....

Your bank:
To:
(Bank/Building Society)

Bank's address:
.....
.....
.....

Your account:
Account no: Sort code:

Please pay to Barclays Bank Plc of High Street, Chipping Norton for the account of
LAWRENCE HOME NURSING TEAM (Account No. 40712442) (Sort Code 20-03-84):

Amount (in words & figures):
The sum of £ (figures)
.....(words)

on theday of.....(month).....(year)
and a like sum each year/quarter/month*until further notice.

Signature:
Signed:

Date:

**PLEASE NOTE THAT THIS REPLACES ANY PREVIOUS
STANDING ORDER FORMS**

**Please send this form to: Lawrence Home Nursing Team, care of the Treasurer, Lawrence Home
Nursing Team, Chipping Norton Hospital, Russell Way, London Rd, Chipping Norton OX7 5FA**

* delete as appropriate