

**BANKERS ORDER FORM**

To : The Manager .....Bank

Date .....

Branch Address.....

Please pay to CAF Bank Ltd, 25 Kings Hill Avenue, West Malling, Kent ME19 4JQ

Sort code 40-52-40 for the credit of PLUME AVENUE UNITED REFORMED CHURCH

Account No 00006934 the sum of £..... every month commencing on  
.....(date) and thereafter until further notice/.....(date)

Account to be debited

Name.....

Account No ..... Sort code .....

Address.....

Signed .....