

## Standing Order Set-Up Form Fermoy GAA Patrons Donation Scheme

To the Manager	
Branch Address	
I/We herby authorise and request you to debit my/our account (Details of the account from which payments will be made)	
Account Name	
BIC (optional)	
IBAN	
and to credit the Benefic (Details of the account to wh	
Account Name	Fermoy GAA - Development Account
BIC	B O F I I E 2 D
IBAN	I E 0 3 B O F I 9 0 2 8 6 4 6 5 7 6 6 0 0 7
Beneficiary /Receiver Reference	Reference to appear on Beneficiary/Receiver Statement
Start Date (cannot be historic)	D D M M Y Y
requency	Weekly Quarterly Monthly Annually
Number of Payments	
Amount	
Signature	Date
Signature	Date

Please allow 5 working days prior to the first payment due date

Completed form should be returned to your branch