

Corinthian Church & Healing Association

(Please use Block capitals) for Donations

YOUR BANK MANAGER

To: The Manager Bank/Building Society

Address _____

Name(s) of Account Holder(s)

Bank/Building Society Account Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Signature(s)

Date:

Name _____

Address _____

Post Code _____

Instructions to your bank or Building Society

Please pay to the Corinthian Church & Healing Association

Barclays Bank

Account Number

1	0	3	2	7	0	4	2													
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Sort Code

2	0	-	2	7	-	9	1
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The Sum of £: -

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Commencing on the: -

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Every: year/quarter/month/one of payment
(delete as appropriate) On the same day until
further noticed

Please return completed Mandate to:

Corinthian Church & Healing Association

Primrose Hill

15a London Road

Hailsham

BN27 1EB

THANK YOU