



STANDING ORDER FORM

NAME AND ADDRESS OF YOUR BANK:

Bank:

Address:

BANK INSTRUCTIONS:

Please pay the following amount: €10 €20 €50 Other _____

on the same day every month starting on the _____
until further notice.

Sort Code _____

Account No _____

Account Holder's Name _____

Account Holder's Address _____

Signature _____ Date _____

INSTRUCTIONS TO YOUR BANK:

Please pay the monthly amount to:

Dogs In Distress,
A.I.B. Dunboyne, Co Meath, IE
Sort Code 93-23-96
Acct No: 10128011
