



Galactosaemia Support Group Bankers Order

Charity number 1020167
www.galactosaemia.org

To: _____
(Full name of your bank)

of: _____
(Address of your branch)

Please pay the sum of £ _____ (_____)
(Sum in words)

on _____ and thereafter monthly/annually until further notice to
(Date from which first payment is due)

National Westminster Bank Plc, 27 Market Place, Bingham, Nottingham, NG13 8JY
(Branch address of bank)

Sort Code: 60-02-41 for the credit of the **Galactosaemia Support Group (GSG)**

Account No: 21611033 Quoting reference: _____
(Name of Member/Donor in Block Capitals)

and debit the account of: _____ Account No: _____
(Name of your Account to be debited)

Sort Code: _____

This instruction cancels any previous order, in favour of the above payee's account 60-02-41 21611033.

Signed _____ Date _____
(Account signatory)

Surname: _____

First name: _____

Address: _____

Postcode: _____

When completed please return this form to: Sue Bevington, Galactosaemia Support Group, 31 Cotysmore Road, Sutton Coldfield, West Midlands, B75 6BJ.