

**Standing Order Mandate Form**  
**Ashbourne/Donaghmore Parish**

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Address \_\_\_\_\_

Bank Code \_\_\_\_\_

Account Number \_\_\_\_\_

Please pay to Bank of Ireland, Ashbourne

Bank Code 90 31 89, Account No. 95175224, BIC BOFIE2D

IBAN IE72 BOFI 9031 8995 1752 24

Ashbourne Donaghmore Parish Fund the sum of

€15 monthly

€20 monthly

€25 monthly

€30 monthly

€ \_\_\_\_\_ monthly

*Please tick box*

**To Bank: Please quote name for reference**

First Payment Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ until further notice

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Mile Buiochas      Thank you for your generosity**

**Please return this form to the Parish Office**