

Bankers Order

Cov Ref _____

Sandford Park School, Ranelagh, Dublin 6

- **Kindly return this to The Bursar, Sandford Park School and not directly to your bank**

To: **The Manager**
Name and Full Address of _____
Your Bank (*in Capitals*) _____

I / We _____ (*name*) authorise and request you

to debit my/our Account No: _____ and credit the account of the

Sandford Park School Ltd Development Fund Account (**Account number 406-491-75**),
AIB Bank, 40/41 Westmoreland Street, Dublin 2, (**Sort code 93-12-25**).

with the sum of € _____ (*Amount in words*) _____.

This amount is to be paid _____ (**annually, quarterly, monthly**)

for a period of _____ years, that is a total of _____ payments.

This first payment is to be made on _____ (*date*).

It shall be understood that the Bank shall not be under any liability for damage or loss caused by any omission to make these payments. Please allow 5 days notice prior to the date of the first payment.

Signature(s): _____

Date: _____
