

BANKERS ORDER FORM



Friends of Bristol Eye Hospital

Your Donation													
Please pay Friends of Bristol Eye Hospital the sum of						£							
every (delete as appropriate)						month		quarter		year			
until further notice starting on						D	D	M	M	2	0	Y	Y

Your details											
Surname											
Forename(s)								Title			
Address											
		Postcode									

Your bank's details																	
Your Bank																	
Address																	
		Postcode															
Account Holder Name																	
Sort Code								Account Number									
Signature								Date									

Our bank's details																	
Our Bank		CAF Bank Ltd															
Address		25 Kings Hill Avenue, Kings Hill, West Malling, Kent, ME19 4JQ															
Account		Friends of Bristol Eye Hospital															
Sort Code		4	0	5	2	4	0	Account Number		0	0	0	1	2	5	7	0

Please return this form to:
 Friends of Bristol Eye Hospital,
 Lower Maudlin Street,
 Bristol, BS1 2LX

Registered charity number 274349

www.fbeh.org

May 2020