



LOVE SHACK

Love for Sick, Homeless & Abandoned Children in Kenya

Standing Order Form

Date: _____

To the Manager: _____ Bank

Bank Address: _____

I/We hereby authorise and request you to debit my/our account

Account Number: _____ Sort Code: ____ - ____ - ____

With the amount of _____

Amount in words: _____

And to credit: Love SHACK

Account number: CA2 1200002056

Payee reference number: (put your surname here) _____

Bank Address: NIC Bank Ltd, Nairobi, Kenya.

Frequency: _____

Start Date: _____

Until further notice in writing.

I understand the bank shall not be under any liability for damage or loss caused by any omission to make these payments.

Please allow 5 working day notice prior to first payment.

Name/Account title (Block capitals): _____

Please print your name here followed by

Signature: _____

Contact Details

Name: _____

Address: _____

Email: _____

How did you hear about us? _____