

Church Reference Number: _____ (For office use only)

St Peter's Parish, Drogheda

Standing Order Form

To: _____ Bank

Address: _____

Please debit my account, number:

The sum of: € _____ to be debited on a monthly /quarterly / annual basis
commencing on ___ / ___ /20__ to the credit of St Peter's Parish Envelope Collection
Account No: 35805507, sort code: 93 20 94.

Signature: _____ Date: ___ / ___ / 20__

Name: (In Block Letters) _____

Address: _____

The amount indicated above is to be divided to include both Priest Dues and Weekly
Envelopes contribution as follows: Priests Dues: € _____
Weekly Envelope: € _____

To ensure all amounts contributed are properly accredited kindly return completed
forms to: *Parochial House, 9 Fair Street, Drogheda (tel: 041 9838537)*

Many thanks for continuing to support our parish.