



FOOD PROGRAMME STANDING ORDER

Please insert the name, branch and address of your bank.

_____ Bank Plc
_____ Branch

Please pay to Lloyds TSB

Sort Code: 30-93-73
Account: Goal50
Account no: 21850168

the sum of £ _____ in words _____ pounds
on the _____ of the month, commencing _____ until this Order
is cancelled in writing.

QUOTE REFERENCE - Feeding Programme

Please debit the following account:

Account name: _____

Account number: _____

Signed _____

Date: _____

Please return this form to:
Goal50, Chy Lowena, Murette De Haut,
St Martin's, Guernsey, Channel Islands GY4 6JL

**FROM AS LITTLE AS
£10^{PER} MONTH**
tackling poverty