BVHG

• BRITISH VIRAL HEPATITIS GROUP •

# Instruction to your Bank or Building Society to pay by Direct Debit

**Please fill in the whole form using a ball point pen and send it to:**

BASL
Unit 24, Level 6 North
New England House
Brighton
BN1 4GH

**Originator's Identification Number**

| 6 | 8 | 6 | 3 | 7 | 9 |
|---|---|---|---|---|---|

**Name(s) of Account Holder(s)**

**Reference Number**

| B | V | H | G | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

**Bank/Building Society account number**

| | | | | | | | |
|---|---|---|---|---|---|---|---|

**Instruction to your Bank or Building Society**
Please pay (an company) Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with (an companY0 and, if so, details will be passed electronically to my Bank/Building Society.

**Branch Sort Code**

| | | | | | |
|---|---|---|---|---|---|

**Name and full postal address of your Bank or Building Society**

To: The Manager — Bank/Building Society

Address

Postcode

Signature(s)

Date

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

DDI2

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This guarantee should be detached and retained by the Payer.

# The Direct Debit Guarantee

- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change (an company) will notify you (insert days) working days in advance of your account being debited or as otherwise agreed.
- If an error is made by (an company) or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.