

A chara,

Donegal ETB currently make payments to Suppliers, Staff and Members of the Board and Sub-Committees by Electronic Funds Transfer (EFT) **only**.

***Please Note:***

**A Republic of Ireland Bank Account is required for EFT payment.**

**Failure to supply the required information below will result in payments being withheld pending receipt of the information requested below.**

Therefore, we request that you complete in full and return the ELECTRONIC FUNDS AUTHORISATION below to:

**Aidan Mc Closkey,**

**Local Youth Club Grants Committee**

**Donegal ETB, Ard O’Donnell, Letterkenny, Co. Donegal**

|  |  |
| --- | --- |
| Name of Club/Group |  |
| Account Name |  |
| Treasurer’s Name  |  | Telephone No. |   |
| Address |  | Email |   |
| R.O.I. Bank Name & Address |  |
| **IBAN No** |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| **BIC / SWIFT No** |  |   |   |   |   |   |   |   |   |
| **Account No** |  |   |   |   |   |   |   |   |  | **Bank Sort Code** |   |   |   |   |   |   |
| **Tax Ref Number** |  |   |   |   |   |   |   |   |  | **CHY Number** |   |   |   |   |   |   |  |  |  |

I hereby authorise Donegal ETB to lodge all payments due to this Club/Group, to the account details supplied herewith. I undertake to repay any payment(s) lodged to this Bank Account, to which I am not rightfully entitled. I declare that all information supplied by me in relation to the above is both true and accurate.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Treasurer

|  |  |
| --- | --- |
| Please have you bank affix its official stamp to confirm the details provided are true and accurate. | [Official Bank Stamp] |