

## **SUPPLEMENTARY INSURANCE SCHEME**



## INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY **TO PAY DIRECT DEBITS**

## PLEASE COMPLETE SECTIONS 1 TO 5

<b>1</b> . N	Name &	full postal	address	of vour	Bank or B	uildina	Society	/ branch
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Bank or Building Society  Postcode  Name(s) of account holder(s)  Branch sort code  Instruction to your Bank or Building Society  ease pay Philip Williams & Co Direct Debits from the account etailed in this instruction subject to safeguards assured by the irect Debit Guarantee. I understand that this instruction may main with Philip Williams & Co and, if so, details will be passed ectronically to my Bank/Building Society.	Tay The Manager								ra
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Please complete and return with your completed application form to: Philip Williams & Co, 35 Walton Road, Stockton Heath, Warrington, WA4 6NW