

**Falkirk Council Children's Services  
Parent Council  
Change of Bank Account Advice**

Parent Council Name

Treasurer Name

Treasurer Address

Post Code

**Old Bank Details:**

Bank Name

Bank Address

Sort Code  Account No.

Name of Account Holder

**New Bank Details:**

Bank Name

Bank Address

Sort Code  Account No.

Treasurer's Signature  Date

Chairperson's Signature  Date

PLEASE RETURN COMPLETED FORM TO FINANCE TEAM.

FALKIRK COUNCIL CREDITORS DEPARTMENT ARE RESPONSIBLE FOR SENDING PAYMENT ON OUR BEHALF. FOR FRAUD PREVENTION REASONS THEY MAY CONTACT YOU DIRECT TO CONFIRM DETAILS BEFORE PROCESSING THE AMENDMENT.