

CHILD BENEFIT ON LINE SERVICE HM REVENUE AND CUSTOMS

Title

Surname.....

First name/names.....

D.o.b

Nat insurance Number

Child benefit Number

Phone Number

Address.....

.....

Further Details

Childs full name(eldest child only)

Childs d.o.b.....

APPLICATION FOR PAYMENTS DIRECT INTO SOUTH MANCHESTER CREDIT UNION ACCOUNT

NAME OF ACCOUNT SOUTH MANCHESTER CREDIT UNION

BANK CO-OPERATIVE

SORT CODE 08-92-50

ACCOUNT NUMBER 67001990

Declaration

I declare that i want my child benefit paid direct into south Manchester credit unions bank account.

I have read and understood the conditions applying to payment this was which are explained at 'Conditions applying to payments of child benefit direct into an account'.

I agree with the above declaration

Signature.....

Date.....

Authorised by