

**BUCKINGHAMSHIRE COUNTY COUNCIL**  
**FINANCIAL SERVICES – CHILDREN & YOUNG PEOPLE’S SERVICES**  
County Hall, Aylesbury, Bucks HP20 1UZ

Dear Sir/Madam

**FOR EARLY EDUCATION PROVIDERS: FINANCE CONTACT/ADDRESS/BANK ACCOUNT CHANGES**

Please use this form to record any changes in the finance contact name, address or bank details for your setting. Please complete all sections, even where there is no change and sign the form.  
**Please return to: Marrion Snell, Customer Support, Finance, County Hall, Aylesbury, Bucks HP20 1UZ or fax to 01296 383942.** If you have any queries on this form please telephone on 01296 382222.

Yours faithfully



**Jonathan Carter**  
**Management Accountant**  
**Schools and Early Years Funding Team**

**Provider Business Name:**

**Contact Name:**

**Address for Correspondence:**

**Telephone No:**

<b>AM:</b>	<input type="text"/>	<b>PM:</b>	<input type="text"/>
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**Sort Code:**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Account Number:**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Account Name/Title:**

**Bank/Building Society Name:**

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

**Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

<b>Office Use Only</b>	VN Requested:	Verified on SAP:	Vendor No:
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