

Standing Order Mandate

Please complete and return to us at the address below. We will forward to your bank for processing.

Name of Your Bank.....

Address

ACCOUNT TO BE DEBITED

SORT CODE

ACCOUNT NUMBER

ACCOUNT NAME

BENEFICIARY DETAILS

BANK

BRANCH DETAILS

SORT CODE

ACCOUNT NUMBER

BENEFICIARY NAME

REFERENCE

PAYMENT DETAILS

AMOUNT OF PAYMENT £

DATE OF FIRST PAYMENT

TO BE PAID HALF YEARLY

PLEASE CONTINUE PAYMENT UNTIL FURTHER NOTICE

SIGNATURE(S)

DATE

CONTACT TELEPHONE NO:

All boxes must be completed in order for the standing order to be processed

Return address – PO Box 118, Lytham St Annes FY8 1GL