

STANDING ORDER MANDATE

To _____ PLC _____ Branch
(Name of your bank) (Address of your bank)

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 FIRST PAYMENT: £

DATE OF FIRST PAYMENT

AMOUNT OF USUAL PAYMENT: £

DATE OF USUAL PAYMENT

AMOUNT OF USUAL PAYMENT IN WORDS:

WHEN PAID:

UNTIL FURTHER NOTICE

CUSTOMER SIGNATURE(S)

DATE:

CUSTOMER ADDRESS:

TELEPHONE NUMBER:

Please complete and return this form to the Secretary, VHC, 45 Warrington Road, Cuddington CW8 2LN