

Standing Order Mandate

Please note that this form is not to be used for amending existing payments – Use a Standing Order Amendment Form (NWB1665)

Please complete this form in **BLOCK CAPITAL**

To _____ Bank Sort code

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_____ Branch (Full address)

A Customer's Details

Account Name _____ Account Number

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Tel No – Work _____ Tel No – Home _____

Please set up the following Standing Order and debit my/our account accordingly

B Person/Organisation you wish to pay

Name of Person/Organisation	The Cavalier King Charles Spaniel Club														
Bank and Branch Name	National Westminster Bank plc, Bank Street, Mexborough S64 9QE														
Account Number	1	1	5	3	6	4	8	9	Sort Code	5	4	1	0	0	3
Reference to be quoted (NAME AND MEMBERSHIP NUMBER)															

C About payment

Amount details (if the amount of the periodic payments vary they should be incorporated in a schedule overleaf)

Amount of first payment (if different) £ .	Amount of normal payment £ .
Amount of normal payment in words	
Amount of final payment (if different) £	

When Paid

Day or date of payments	01 January	Frequency	YEARLY
Commencing	01/01/		
Total number of payments		Or expiry date	/ / or until further notice
Special Instructions			

D Confirmation

I/We acknowledge the Bank will not undertake to:
 (i) make any reference to value Added Tax, or other indeterminate element
 (ii) advise payer's address to beneficiary
 (iii) advise beneficiary of inability to pay
 (iv) request beneficiary's banker to advise beneficiary of receipt

Customer(s) Signature(s) _____

Date _____

Served By _____ at _____ Branch

ITS No _____

Bank Use Only		
Keyed by (initials)	<table border="1" style="width: 100%; height: 20px;"><tr><td></td></tr></table>	
Date	_____	