## **BANKER'S STANDING ORDER MANDATE**

Please complete all sections of this form in BLOCK CAPITALS

To (name of your bank)		·		17					
Your bank's address									
Postcode	3			www.component					
		v						er.	
Name of account holder(s)	2	2			3.			97	ř
Account holder(s) address									
Postcode									
Sort Code				Ad	ccount	Numb	er		
		1 1		l .	1			1	
Signature		'			_ Date				
Signature  Please pay the sum of £			Vionth	ly*	Qua	ırterly*		Annu	
			Vionth	l <b>y*</b> elete as		arterly*		Annu	ally*
Please pay the sum of £		Pa	*(de	ly* elete as and	Qua appropri	arterly* ate) fter un	til furt	Annu	ally*
Please pay the sum of £  Commencing on (date)  To: HSBC Bank plc 69 Pall Mall LONDON SW1Y 5EY		Pa	*(de	elete as and School:	Qua appropri I therea	ate)  fter un	til furt	Annu	ally*
Please pay the sum of £  Commencing on (date)  To: HSBC Bank plc 69 Pall Mall LONDON SW1Y 5EY  Sort Code		Pe RO	*(de	elete as and School:	Qua appropri I therea Edmund	ate)  fter un  d's Prim	til furt	Annu	ally*
Please pay the sum of £  Commencing on (date)  To: HSBC Bank plc 69 Pall Mall LONDON SW1Y 5EY	0	Pa	*(de	elete as and School:	Qua appropri I therea	ate)  fter un	til furt	Annu	ally*

Please return this form once completed to the Gift Aid Organiser c/o the school office

<sup>#</sup>Organiser to insert GAD Number and old standing order amount before sending to bank.