

# Standing Order Mandate

The co-operative bank

To \_\_\_\_\_ (Your Bank)

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please Pay **The Co-operative Bank SORT CODE 08-92-99**

For the Credit of IYN

6	5	3	0	9	9	6	6		0	0
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Account Number and Type

The Sum of First Payment **£50 Fifty Pounds**

Commencing **NOW**

and thereafter every three calendar months until you receive further notice from me/us in writing

Quoting Reference \_\_\_\_\_ (your name here please)  
and debit my/our account accordingly

Please cancel any previous standing order or direct debit in favour of the beneficiary named above under this reference

Special Instructions

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Account to be Debited

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Sort Code

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Account Number

Signature(s) \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

**Note:** The Bank will not undertake to:

1. Make any reference to Value Added Tax or other indeterminate element;
2. Advise payer's address to beneficiary;
3. Advise beneficiary of inability to pay;
4. Request beneficiary's banker to advise beneficiary of receipt.

**Note:** Please ensure signed in accord with account mandate