

# Standing Order Mandate(Hand to your own bank)

Name of your Bank:.....

Your Bank's Address:.....

New Instruction (Please tick)

## ACCOUNT TO BE DEBITED (Your details)

SORT CODE

ACCOUNT NUMBER

NAME(S) OF ACCOUNT HOLDER(S)	
REFERENCE	

## BENEFICIARY DETAILS (Our details)

BANK

BRANCH DETAILS

SORT CODE

ACCOUNT NUMBER

BENEFICIARY NAME: City Central Mosque

## PAYMENT DETAILS:

AMOUNT OF FIRST PAYMENT  £

DATE OF FIRST PAYMENT   20

AMOUNT OF USUAL PAYMENT  £

AMOUNT OF USUAL PAYMENT IN WORDS

TO BE PAID

MONTHLY

DATE OF USUAL PAYMENT

**OF EVERY MONTH**

PLEASE CONTINUE PAYMENT UNTIL FURTHER NOTICE

CUSTOMER'S SIGNATURE(S) .....

DATE   20