

STANDING ORDER MANDATE

To (Your Bank Name): _____

Branch: _____

Your Phone No.: _____

NEW INSTRUCTION

ACCOUNT TO BE DEBITED

Sort Code: ____ - ____ - ____

Account Number: _____

Account Name: _____

BENEFICIARY DETAILS

Bank: LLOYDS TSB BANK

Sort Code: 30-13-55

Account Number: 01672856

Account Name: CAMBRIDGE MUSLIM
WELFARE SOCIETY

SIGNATURE(S): _____

PAYMENT DETAILS

Amount of first payment: £ _____

Date of first payment: ____ / ____ / ____

Amount of usual payment: £ _____

Amount of usual
payment in words: _____

To be paid: Weekly Monthly Quarterly
 Twice a year Annually

Date of usual payment: _____

Please continue payments until:

Further Notice Date: ____ / ____ / ____

Gift Aid: Adds 28% to your donation via tax
reclaim with **no** charge to you.

DATE: ____ / ____ / ____