

To (Name and Address of Bank.)

WENDOVER ARM TRUST STANDING ORDER MANDATE

Please complete this Banker's Order form and send it to your Bank or Building Society.

Bank								Branch			
Account to be debite	Sort	Account Number									
Name:											
Beneficiary's I	Name	Sort	Code	Account Numb					mbe	er	
WENDOVER ARM TRUST		05 - 04 - 61		67957123							
Bank			Branch Title								
YORKSHIRE BANK plc.			NORTHAMPTON BRANCH								
Wendover Arm Trust Reference											
Membership N											
Frequency of payment			Date of first payment								
ANNUALLY											
Amount of Annual Payment			Amount of Payment in words								
Subscription	£										
Donation	£										
Total	£										
Please debit my / our	account annu	ally in the	sum stated	labo	ove	unti	l fur	ther	not	ice.	
SIGNATURE(s)				Dat	te						
. ,				•							
				•							

(Please complete in BLOCK CAPITALS)