**STANDING ORDER MANDATE**

|  |  |
| --- | --- |
| To The Manager |  |
|  |  |
| Branch Address |  |
|  |  |
| Sort Code |  |

|  |
| --- |
| Please set up the following standing order and debit my/our account accordingly |
|  |  |
| For the account of | **Unique** Rare Chromosome Disorder Support Group |
|  |  |
| Account No. | 00014005 |
|  |  |
| Sort Code | 40-52-40 |
| Name[s] of Account Holder[s] to be debited |  |
|  |  |
| Account No. |  |
|  |  |
| Payment Amount |  |
|  |  |
| 1st Payment Date |  |
|  |  |
| Expiry [delete as appropriate] | Until Further Notice OR Date: |
|  |  |
| Frequency [delete as appropriate] | Monthly Quarterly Yearly |
|  |  |
| I/We acknowledge the Bank will not undertake to:* Make any reference to Value Added Tax or other indeterminate element
* Advise the beneficiary of inability to pay
* Request beneficiary’s banker to advise beneficiary of receipt
 |
| Signature[s]: |  | Date**:** |  |
| gift aid logo |
|  **Please ensure that you complete a Gift Aid form if you are a UK taxpayer** |