

Standing Order Mandate

**Your Details:**

Name: ……………………………………………………………………………………..

Address: ………………………………………………………………………………….….

…………………………………………………………………………………..…

Postcode: .…………………………………………………………………………………….

**To Manager: (your bank details)**

Bank: …………………………………..…………………………………………………

Address: ……………………………………………………………………………………..

…………………………..…………………………………………………………

Postcode: ……………………………………………………………………………………..

**Please pay St. John Red Cross DMWS**

£ \_\_\_\_\_\_\_\_\_ per month/quarter/annually

Until further notice / for 3 years and debit (delete accordingly)

Account Number: …………………………………..

Sort Code: ......../.…...../…..…

Starting on: \_\_\_\_/\_\_\_\_/\_\_\_\_ (please allow 1 month from today)

Mr / Mrs / Miss / Ms: …………………………………………..………………………………..

Signed: ………………………………………..… Date: …………...………………….

**FOR OFFICE USE ONLY:**

To: NatWest

Account No: 94780307 Sort Code: 60-19-27

Please quote our reference: ……………………………..

Return to: DMWS, The Old Stables, Redenham Park, Andover, Hampshire SP11 9AQ. Tel: 01264 774000

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