



## Standing Order Mandate

*Please write the name and address of your bank below*

Bank name: .....

Address: .....

Post Code: .....

Bank Sort Code: ..... - ..... - .....

Please pay this Standing Order with effect from the commencement date shown below.

Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>Please pay the Standing Order to:</b>	<b>(BENEFICIARY DETAILS)</b>
Bank: <b>Lloyds TSB Bank plc.</b>	
Branch Address: <b>12 Swan Street, Warwick, CV34 4BJ</b>	
Account Name: <b>Stratford Group of Advanced Motorists</b>	
Account Number: <b>01314593</b>	
Sort Code: <b>30-99-15</b>	
Reference: SUBS/ _____ / _____ / _____	
	<i>Last Name First Name 4 Digit Stratford IAM Group Membership No.</i>

**Please pay the following:** **(PAYMENT DETAILS)**

Amount  In words

Commencing : 1st / \_\_\_\_\_ /201\_\_ and thereafter **ANNUALLY** until further notice

<b>To be debited from my Account:</b>	<b>(REMITTERS DETAILS)</b>
Account Number	<input type="text"/>
Name(s)	<input type="text"/>
Special Instruction	
<b>Please cancel all previous Standing Orders and/or Direct Debit mandates under reference no:</b>	

**BANKS MAY DECLINE TO ACCEPT INSTRUCTIONS TO CHARGE STANDING ORDERS  
TO CERTAIN TYPES OF ACCOUNTS OTHER THAN CURRENT ACCOUNTS.**