

STANDING ORDER MANDATE

Please forward completed mandate to your bank

Please complete the form in BLOCK CAPITALS:

To _____ Bank Sort code _____
_____ Branch

A. Customers Details

Account Name _____ Account Number _____
Tel No-work _____ Tel No-home _____

Please set up the following Standing Order and debit my/our account accordingly for the benefit of the following recipient:

B. Recipient Details

Name of Organisation: **Alliance for Natural Health**
Bank & Branch Name: **Natwest Bank, Guildford High Street, Guildford, England**
Sort code: **60-09-21**
Account: **12765309**

C. About the Payment

Amount Details (tick as appropriate):

Amount of Payment: £10 £20 £50 £100 Other £.....
(specify)

Amount of Payment in words: _____

When Paid:

Day or Date of Payments: _____ Frequency: _____
(e.g., Friday 1st, 30th May) (e.g., Monthly, weekly)

Commencing: _____

Total number of payments: _____ or Expiry date: _____ or Until Further Notice: _____

D. Special Instructions (if applicable)

E. Customer Signature:

(signature)

(date)

NOTE TO BANK

Please forward confirmation of this standing order by fax or post to:

Fax: 01306 646 552; Tel: 01306 646 600; e-mail: info@anhcampaign.org. Thank you.