

Standing Order Form

Bank & Branch Name

Bank Account Number

Bank Sort Code

If you wish to make payments directly from your bank account to the credit union, please complete and return to office.

1. Your Details	
Your full name	
Your Bank Branch Name	
Your Bank Address	
Your Bank Account Number	
Your Bank Sort Code	
2. Your instruction to bank and signature	
2. Your instruction	to bank and signature
2. Your instruction Payment Ref (Your Name & Member no)	to bank and signature
Payment Ref (Your Name &	to bank and signature
Payment Ref (Your Name & Member no) How often do you want the	to bank and signature
Payment Ref (Your Name & Member no) How often do you want the payments made?	to bank and signature
Payment Ref (Your Name & Member no) How often do you want the payments made? Payment Amount	to bank and signature

I authorise you to debit my account with the details in Section 2.

50280728

08 90 47

CO-OPERATIVE BANK PLC 1 BALLOON STREET MANCHESTER M60 1GP

Your Signature	
Date	