

Standing Order Mandate

Please note that this form is not to be used for amending existing payments - Use a Standing Order Amendment Form (NWB1665)

Please complete this form in **BLOCK CAPITALS**

X To _____ Bank Sort Code

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 _____ Branch
 (Full address)

A Customer's Details

X Account Name _____ Account Number

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 Tel No - Work _____ Tel No - Home _____

Please set up the following Standing Order and debit my/our account accordingly

B Person/Organisation you wish to pay

Name of Person/Organisation BELVOIR CRICKET CLUB TOTE														
Bank and Branch Name NATWEST - GRANTHAM														
Account Number <table border="1" style="display: inline-table;"><tr><td>3</td><td>2</td><td>2</td><td>2</td><td>3</td><td>7</td><td>8</td></tr></table>	3	2	2	2	3	7	8	Sort Code <table border="1" style="display: inline-table;"><tr><td>6</td><td>0</td><td>0</td><td>9</td><td>0</td><td>9</td></tr></table>	6	0	0	9	0	9
3	2	2	2	3	7	8								
6	0	0	9	0	9									
Reference to be quoted (if any)														

C About the Payment

Amount Details (If the amount of the periodic payments vary they should be incorporated in a schedule overleaf)

Amount of first payment (if different) £	Amount of normal payment £ 4 —
Amount of normal payment in words FOUR POUNDS	
Amount of final payment (if different) £	

When Paid (Please note: Payment to an account held at NatWest will normally be received by the beneficiary on the nominated payment date. Payment to an account held at a different bank will be received by the beneficiary 3 working days after your nominated payment date.)

Day or date of payments 1st <small>(eg Friday, 1st, 30th May)</small>	Frequency MONTHLY <small>(eg weekly, monthly, yearly)</small>	
Commencing Now / ___ / ___ (Delete as appropriate)		
Total number of payments <table border="1" style="display: inline-table;"><tr><td> </td></tr></table> or Expiry date ___ / ___ / ___ or Until further notice <input checked="" type="checkbox"/>		
Special Instructions		

D Confirmation

I/We acknowledge the Bank will not undertake to:
 (i) make any reference to Value Added Tax, or other indeterminate element
 (ii) advise payers address to beneficiary
 (iii) advise beneficiary of inability to pay
 (iv) request beneficiary's banker to advise beneficiary of receipt

Bank Use Only		
Keyed by <table border="1" style="display: inline-table;"><tr><td> </td></tr></table> (initials)		
Date _____		

X Customer(s) Signature(s) _____
 Date _____
 Served by _____ at _____ Branch
 ITS No _____ External No _____



NWB1320 Rev Jan 99-1

For Belvoir Cricket Club Correspondence

Chairman: Andrew Dann, 96 Manthorpe Road, Grantham, Lincs NG31 8DL Tel: 07506 746054
 Secretary: Kate Bygott, Corner House, 1 Main Street, Sewstern Nr Grantham. Lincs NG33 5RF Tel: 01476 861940
 Treasurer: Simon Poole, 4 Vernon Row, Main Street, Redmile, Notts NG13 0GA Tel: 01949 843151