



STANDING ORDER AUTHORITY

Please fill in this form and hand direct to your Bank or Building Society.
Do not send this form the the Association.

Complete in BLOCK CAPITALS and mark an X in the relevant boxes

Customer Details

Account in the Name(s) of	
Bank/Building Society Name	
Branch Name	
Address	
Postcode	
Account Number	
Sort Code	

Instruction Details

Does this authority replace an existing standing order?

Yes

No

Organisation you wish to pay

Name of Organisation	HURRICANE 5.9 CLASS ASSOCIATION
Bank Name	LLOYDS TSB
Branch Name	RICHMOND
Account Number	0641447
Sort Code	30-97-06

Payment Details

Amount of first payment	£
Date of first payment	1st January or immediately if this authority is received after this date
Amount of usual payment	£
Amount of usual payment in words	
When paid	Annually
Day or date of Payment	1st January

Please continue payments UNTIL FURTHER NOTICE Yes

Customer(s) Signature

Date