STANDING ORDER FORM

To my Bank Manager

Bank Name	
Bank Address	
Bank Account Number	
Bank Sort Code	

Please Pay

Payee Bank	Lloyds Bank Plc
Payee Account Name	BCCSD
Payee Sort Code	30-96-26
Payee Account Number	78686868
Payee Amount	
Frequency (monthly/weekly/annually)	
First Payment Date	
Please quote account holder name	

Name	
Address	
Signature	