## Instructions for The Completion of Standing Order Mandate Form

Please fill in:			
		To:	The Manager
Your bank's name and		Bank name:	
address -	•	Bank address:	
		Postcode:	
		Please pay:	Unity trust bank plc Birmingham
		For the credit of:	The pancreatitis supporters network
Varia na anala anala in facilis	i+h a n C7 F0 On C10 in		Account Number 5 4 0 0 0 7 9 7 0 0 Sort Code 08 - 60 - 91
Your membership fee (eifigures and words)	ther £7.50 or £10 in	The sum of (in numbers and words):	£
Date the form —	<b></b>	Commencing now on the day of in the year for the amount of E and thereafter every on the 1st day of April until you receive further notice from me/us in writing, quoting PSN MEMBERSHIP FEE and debit my account accordingly: -	
Your account name —		Account name to be debited.	il en
Your account number — Sort code —		Account number:	
3011 6046		Sort code:	
		W	<u> </u>

Sign and date the form where it says signature/date

Please print out and complete, and return the whole form to your personal bank to undertake the instructions.

There is enough information herein for you to set payment up online as well

**NB**: with standing orders I/we cannot request any money from your account and you can stop this at any time by writing to your bank

## STANDING ORDER MANDATE

То:	The Manager	
Bank name:		
Bank address:		
Postcode:		
Please pay:	Unity trust bank plc Birmingham	
For the credit of:	The pancreatitis supporters network	
	Account Number 5 4 0 0 0 7 9 7 0 0 Sort Code 08 - 60 - 01	
The sum of (in numbers and words):	£	
	ay of in the year for the amount of £ and thereafter every year receive further notice from me/us in writing, quoting PSN MEMBERSHIP FEE and	
Account name to be debited:		
Account number:		
Sort code:		
Signature:		
Date:		

This Standing Order Mandate supersedes all previous standing orders to The Pancreatitis Supporters Network

The Bank will not undertake to :

- 1. make any reference to Value Added Tax or other indeterminate element.
- 2. advise payer's address to beneficiary.
- 3. advise beneficiary of inability to pay.
- 4. request beneficiary's banker to advise beneficiary or receipt.