

## Standing Order Mandate

### BLOCK CAPITALS PLEASE

To Bank (your bank).....

Full Postal Address (your bank).....

.....

Post Code.....

Please debit my Account Number.....Sort Code.....

Account Holder's Name.....

Amount: £..... and in words.....

Monthly/Annually (please delete as appropriate)

First payment on:.....

And credit:

Account Number: 65629769

Account Name: PETALS

Sort Code: 08 92 99

Bank Address: The Co-operative Bank, PO Box 250, Delf House,  
Southway, Skelmersdale, WN8 6WT

### **Gift Aid (Please tick)**

I would like all gifts of money I make today and in the future to Petals to be treated as gift  
aid donations

Signature.....Date.....

Full Name and Title.....

Full Postal Address.....

.....

Please forward **one** completed Standing Order Mandate to your bank and a **second** copy to:  
Unit 1, Tunbridge Court, Tunbridge Lane, Bottisham, Cambridge CB25 9TU.....**Thank you!**