

**NEW STANDING ORDER AUTHORITY**

Please complete in BLOCK CAPITALS and tick the relevant boxes, print off the form **AND SIGN IT.**  
**Return to:** Vivien Gillman Skillway Workshops The Old Chapels Deanery Road Godalming GU7 2PG

**Customer Details**

Account in the Name(s) of

Branch Name & Address

Account Number  Sort Code

**Instruction Details**

Does this Authority replace an existing Standing Order  Yes  No  
 Or  
 Direct Debit  Yes  No

Important. If yes, please give details in Special Instructions Section below

**You wish to pay:**

Name of Charity

Bank and Branch Name

Account Number

Sort Code

Reference Number (if any)

**Payment Details**

Amount of First Payment £  Date of First Payment  /  /

Amount of Usual Payment £

Amount of Usual Payment in Words

When Paid  Day or Date   
 (weekly, monthly, annually etc.) of Payment

Amount of Last Payment £  Date of Last Payment

OR Please continue Payments UNTIL FURTHER NOTICE  Tick ?

**Special Instructions**  
 (Include any additional information applicable to this instruction)

**Customer Signature**

**FOR BANK USE ONLY**

Instruction Taken By:

Where Taken (Branch)

Date Time

Source:  
 Counter   
 Telephone   
 Post

**Beneficiary/Originator**

PP Instructions checked For matching S/O or D/D  
 Yes  No   
 Clarified with customer  
 Yes  No

**Payment Details**

Is payment due Today or Tomorrow  
 Yes  No

If Yes advise Specialist staff IMMEDIATELY by fax or telephone to take action

**Special Instructions**  
 Special Instructions clarified with customer  
 Yes  No

**Customer Identified By:**  
 Signature   
 Standard ID