

STANDING ORDER MANDATE TO PAY ASHFORD TOWN PCC

(ST MARY'S GT CHART – JANUS PROJECT)

DONOR'S FULL NAME _____

ADDRESS _____

PLEASE PAY £_____ PER MONTH/QUARTER/ANNUM TO:

ACCOUNT NAME **ASHFORD TOWN PCC** SORT CODE **20 02 62** ACCOUNT NO. **30686611**

TO COMMENCE ON ____/____/____ AND CONTINUE UNTIL CANCELLED OR AMENDED
BY ME IN WRITING. PLEASE QUOTE REFERENCE **JANUS PROJECT**

MY BANK _____ ADDRESS _____

POST CODE _____ SORT CODE _____ ACCOUNT No. _____

Signed _____ Date ____/____/____

THIS IS IN ADDITION TO MY EXISTING ORDER IN FAVOUR OF ASHFORD TOWN PCC

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