To The Manager

Bank name ……..……

Address ……..……

……..……

……..……

……..……

STANDING-ORDER

These instructions are to continue until you receive my/our written instructions to cancel them.

This instruction replaces all previous instructions in favour of Stretton Parish

My/our account no ……

From the …..…… day of ……..……. 20..…

Each week/month/quarter/year

please pay the sum of £…… - …....p

……...…… pounds ……p

To: CAF Bank Ltd, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent, ME19 4JQ

For the account of Stretton Parish
Sorting code 40-52-40. Account no 00090571.

Name ……

Signature ……..……

Date ……..……