

Richmond School Bus Service Standing Order Mandate

Please return completed form direct to your bank
not to Richmond School & Sixth Form College

*New Standing Order Mandate

Bank:

Serial Number

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Branch:

Please make payments as detailed below.

Please complete the following in all cases																		
Account to be debited	Sort Code number	Account number																
.....	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>							<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>										
Account to be credited	Sort Code number	Account number																
Richmond School – Lloyds Bank	77 – 71 - 29	2 0 2 9 9 7 6 0																

Please complete all areas	
Bank	Branch title (not address)
Reference to be quoted: <small>(name of student/bus)</small>	Frequency of regular payment: Monthly
Immediate payment required? No	Amount of immediate payment: None
➤ Amount of regular payment: * £68.40/ £57.00	Amount of regular payment in words * Sixty-eight pounds and forty pence/ Fifty-seven pounds/
Date of first regular payment: 1 October 2018	
Date of final payment: 1 July 2019	Amount of final payment: * £68.40/£57.00

* Delete as appropriate

and debit my/our account accordingly.

➤ If the amounts of the periodic payments vary they should be incorporated in a schedule overleaf.

This instruction cancels any previous order in favour of the beneficiary named above under this reference. Please detail any special instructions overleaf.

Signature(s): Date:

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