

Standing Order Mandate

Please pay

Bank: Ulster Branch Title: *(not address)* Belfast City Office 1 Branch Sort Code: 98-00-60

for the credit of: £

Beneficiary's Name: Food for Thought Africa Account Number:

0	0	7	1	9	5	1	8
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the sum of:
Amount in Figures: £ Amount in Words:

commencing:
Date & Amount of First Payment and thereafter every Due Date and Frequency

/ / £

* until: Date and Amount of Last Payment

/ / £ *until you receive further notice from me/us in writing

quoting the reference: and debit my/our account accordingly

Account Holding Branch & Sort Code:

Account Number:

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Account Name to be Debited:

Gift Aid: Yes No

Signature(s): _____ Date: _____

Note: The Bank **will not** undertake to:

- i make any reference to Value Added Tax or other indeterminate element
- ii advise payer's address to beneficiary
- iii advise beneficiary of inability to pay
- iv request beneficiary's banker to advise beneficiary of receipt

* Delete if not applicable
If the amounts of the periodic payments vary they should be incorporated in a schedule overleaf