

STANDING ORDER MANDATE

To:

Address:

Please pay	Bank		Branch Title				Sort Code						
	Cater Allen Private Bank		Bradford				16-57-10						
for the credit of	Beneficiary's Name						Account Number						
	The Kawaza School Charitable Trust						5	4	8	9	1	0	4
the sum of	Amount in figures			Amount in words									
	£												
commencing	Date of first payment	Amount of first payment	and thereafter every				Due Date		Frequency				
		£											
*until	Date of last payment	Amount of last payment	* until you receive further notice from us in writing										
		£											
quoting the reference		Gift Aid (your name and initials)											
SPECIAL INSTRUCTIONS													
Please debit	Account Name						Account Number						
Signature(s)						Note: The bank will not undertake to: (i) make any reference to VAT 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						
Date												

* Delete if not applicable

THIS INSTRUCTION CANCELS ANY PREVIOUS ORDER IN FAVOUR OF THE BENEFICIARY NAMED ABOVE UNDER THIS REFERENCE