Standing Order Mandate		
Name of the Bank:		
Address of the Bank:		
Sort Code:	Account Number:	
Account Holder Name(s):		
Address:		
Please Debit £ (in words		)
Monthly		
On the of each Month		
Starting on		
until this instruction is cancelled.		
Signed:	Date:	
For Bank Use Only Please credit the payments to:		
Shahjalal Latifiah Academy		
HSBC Bank Plc		
Bradford City Centre Branch		
47 Market Street, Bradford BD1 1LV	V	
Sort Code 40 13 15	Account No 54471784	

This order supersedes any current instruction