STANDING ORDER MANDATE

PLEASE COMPLETE THIS FORM AND FORWARD DIRECTLY TO **YOUR** BANK

| TO | | Bank |
|---|---|-------------------|
| | | Branch |
| Please make payments as detailed below from my account: | | |
| Account No: | | Sort code: |
| Dates: | | Amount: |
| Frequency: MONTHLY thereafter until further notice. | | |
| Barclays Bank PLC PO Box 104 Ashford Kent TN24 8ZB | | |
| For the credit of: Address | Kent Autistic Trust 14 High Street, Brompton, Gillingham, Kent. ME7 5AE | , Family Support. |
| Account No: Sort code: | 13995194 20-54-11 | |
| Signed | | Date |
| | | |