

Standing Order Authority

| Name and address of your bank: | |
|--|---|
| Please make the following monthly payment, unt | il further notice, to the credit of Active Hope Ltd at the day of each month, commencing |
| Na 74 | NAME AND ADDRESS: atWest Bank, London Road, ockton Heath, WA4 6HS |
| | code: 60 20 29 Number: 39649156 |
| Amount: | £ |
| Name of your account to be debited: | |
| Your Account number: | |
| Your Sort Code: | |
| Signed: | |

This instruction cancels any previous order in favour of the beneficiary named above **Please forward this to your bank and inform Active Hope of this instruction.**



W: www.activehope.org

