

# Standing Order (Authority)

**CAF BANK**  
Charitable Banking

Account Name

.....  
(Insert name of account payments are to be made from):

Account Number:..... Registered Charity No:.....

## Instruction:

Please pay ..... C A F ..... Bank

Branch address ... P O Box 289 .....

..... West Malling Kent ME19 4TA .....

Account number:

0	0	0	0	5	7	6	7
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Sort code:

4	0	5	2	4	0
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Building Society roll number: .....

Beneficiary's name: **Reachout Trust** .....

The sum of	£	Amount in words:
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Date of first payment

and thereafter on the same day every week\* / month\* / quarter\* / year\*; until

Date of final payment\*  Until further notice\*

\*(Please delete as appropriate)

Quoting reference  And debit our account accordingly

**Please cancel any previous Standing Order in favour of this beneficiary under this reference**

Special instructions: (e.g. amount of first or last payment, if different) .....

## Authorisation:

Name ..... Name .....

Position ..... Position .....

Signature ..... Signature .....

Date ..... Date .....

(To be signed in accordance with your mandate)

For office use only

Signatures confirmed	Processed	Checked