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Standing Order Mandate  Bank/Building Society:		
Sort Code:		Account Number:
Account Holder Nar	ne(s):	
Address:		
Please debit £		
Monthly		Weekly $\Box$
On the of each Month		
	until this instru	ction is cancelled
Signed:		
For Bank Use Only	••••••	
Please credit payments to:		
LloydsTSB Bank PLC		
St Albans (309725) E	Branch	
PO Box 1000		
BX1 1LT		
Account Name:	Sort Code	: Account No:
PAPAA	30-97-25	01 84 18 31