

STANDING ORDER MANDATE

Please note that this form is not to be used for amending existing payments.

Please complete this form in BLOCK CAPITALS

To _____ Bank

Sort Code

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Branch

(Full Address)

A Customer Details

Account Name _____ Account Number

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Tel No - Office _____ Tel No - Fax _____

Please set up the following Standing Order and debit my/our account accordingly

B Organisation you wish to pay

Name of Organisation: 121prodata Limited															
Bank and Branch Name: NATWEST - WATFORD															
Account number	3	9	6	7	4	9	6	7	Sort code	6	0	0	0	0	8
Reference (office use only)															

C About the Payment

Amount Details

Amount of First Payment	Amount of Normal Payment £
Amount in Words:	
Amount of Final Payment (if different) £ N/A	

When Paid

Day of Payments:	Frequency: Every 13 weeks
Commencing:	and until further notice

D Confirmation

I/We acknowledge the Bank will not undertake to:

- (i) make any reference to Value Added Tax or other intermediate element
- (ii) advise payer's address to beneficiary
- (iii) advise beneficiary of inability to pay
- (iv) request beneficiary's banker to advise beneficiary of receipt

Customer(s) Signature(s) _____

Date _____