

Standing Order Instruction

1. SCHEME DETAILS

Scheme Name
Account Number

2. BENEFICIARY DETAILS

Beneficiary Name
Beneficiary Sort Code
Beneficiary Account Number
Payment Reference

3. FREQUENCY

Payment Frequency ☐ Weekly ☒ Monthly ☐ Quarterly ☐ Yearly ☐ Other

4. PAYMENT DETAILS

Date and amount of first payment

£

Date and amount of ongoing payments (if amount different from the first payment)

£

Select one of the following options:

☐ 1. Date and amount of final payment

£

☒ 2. Until further notice

5. TRUSTEE SIGNATURE

1st Signatory

Date

FOR INTERNAL USE ONLY

Call back made

Date:

Time:

Administrator Signature

2nd Signatory

Date

Peer Review

Manager Signature

Name:

Date: