



grampian  
credit union

## STANDING ORDER MANDATE

This form instructs your Bank to pay the following agreed amount by Standing Order. **Please complete this form and return to us.**

Our ref \_\_\_\_\_

To the Manager:

Bank Name: \_\_\_\_\_

Branch Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Account Holder: \_\_\_\_\_

Bank Sort Code: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Account Number: \_\_\_\_\_

Please pay on my behalf to:  
Grampian Credit Union Ltd  
Bank of Scotland  
39 Albyn Place  
Aberdeen  
AB10 1YN

**Sort Code: 80-45-06 Account No: 10478563**

The weekly / monthly / 4-weekly amount of £ \_\_\_\_\_

First payment date: \_\_\_\_\_

And thereafter until further notice. This instruction cancels any previous mandate in favour of payee which has **exactly** the same reference as above.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_