

Standing Order Mandate To _____ Bank _____ Branch
 Address _____

Please pay	Bank	Branch Title (not address)	Sort Code
	BARCLAYS	SWINDON CENTRE	20 84 58
For the Credit of	Beneficiary's Name		Account Number
	5637 STEAM LOCO GROUP		80953652
The sum of	Amount in Figures	Amount in words	
	£ 25.00	Twenty five pounds only	

Commencing	Date and amount of first payment * now	£ 25.00	And thereafter every	Due Dates and Frequency
	Date and amount of last payment			MONTH
* until		£ 25.00	Until you receive further notice from me/us in writing	
Quoting the reference			And debit my/our account accordingly	

Account to be debited	Sort Code	Account Number

Signature(s) : _____

Date : _____

Note: The bank will not undertake to:

- * make any reference to VAT or other indeterminate element
- * advise payers address to beneficiary
- * advise beneficiary of inability to pay
- * request beneficiary's banker to advise beneficiary of receipt

If the amounts of the periodic payments vary they should be incorporated in bank schedule NW81320 Rev Feb 82-1