STANDING ORDER MANDATE



To Bank Manager,

Please make the payments detailed below and debit my/our account. This instruction cancels previous order, if any, in favour of the Ipswich and Suffolk Council for Racial Equality.

ISCRE Member's Bank Details:

Account in the Name(s) of									
Bank Name									
Bank Address									
	Post o	co <u>de:</u>							
Sort code									
Account Number									
Pay	CAF I	Bank L	Ltd						
At		ings H , ME19			King	s Hill	l, Wes	st Mailin	ng,
Sort code	40	52	40						
Account Number	0	0	0	1	(6	0	9	7
For credit of	ISCR	E							

Amount to	ay:			
Individuals:	£6 Community/ Charity Group: £10	c	Commencement	
	£3 Commercial/Institutional : £ 50	E.	date:	
Couple :	£10 Public Body : £ 50			

Thereafter, payments to be made annually on 1st October each year, UNTIL FURTHER NOTICE.

As a member of the ISCRE you have the right to cancel this standing order mandate at any time by informing the Office, in writing.

Signature :

Date :

Ipswich and Suffolk Council for Racial Equality

Registered Charity No. 1055386 Company Registration No. 4616709