

Enter **your address**:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STANDING ORDER MANDATE**

Enter the **name** of your bank:

To: The  
Manager

\_\_\_\_\_

Enter the **address** of your Bank/Building Society:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please pay:**

Account Name	<b>GBS RE N BRISTOL NHST CHARITY</b>
Bank	<b>CITIBANK</b>
Address	<b>Citigroup Centre 25 Canada Square Canary Wharf London. E14 5LB</b>
Sort Code	<b>08-33-00</b>
Account No.	<b>12298414</b>
The Sum of:	<b>£</b> _____ (in figures)
	_____ (in words)
Quote Reference	_____

This is to take effect from \_\_\_\_\_ and thereafter every calender month/every year until you receive further notice from me/us in writing.

**Please debit account number:**

\*delete as  
applicable

<b>Account Name:</b>	<b>Account No.</b>
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Signature/s \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

**Please return the completed form to the Charitable Funds Dept., North Bristol NHS Trust,  
Christopher Hancock Building, Southmead Hospital, Westbury-on-Trym, Bristol BS10 5NB**

**North Bristol NHS Trust Charitable Funds: Charity Registration No. 1055900**