



# Comply Forms

## Standing Order Mandate

To the Branch Manager

In signing this standing order mandate you are authorised to set up a recurring monthly payment to Comply Forms in accordance with the details provided.

Please complete fields marked \*

Bank Branch \*

Bank Account Name  
to be debited \*

Bank Account Number  
to be debited - IBAN \*

Bank Identifier Code (BIC)

Payment Amount \*

Monthly Recurring

Start Date \*

Day:	Month:	Year:
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Authorised Signature (s)\*

Creditor Account Name

Creditor Account Number

Bank Identifier Code (BIC)

Please return the completed standing order mandate to your bank at least 5 working days prior to the first payment date.