



AL IKHLAS CENTRE STANDING ORDER MANDATE

Please complete this standing order form in block capitals and give it to your bank either directly or indirectly via Al Ikhlas Management Team.

Your Bank's Name:

Your Bank's Postal Address:.....

Please make the under noted payment until further notice to credit 'AL IKHLAS CENTRE' at the bank named below on the DAY of every MONTH, commencing from/...../.....

Amount £ _____

Please Pay (Beneficiary)	AL IKHLAS CENTRE
Beneficiary's Bank & Branch	'HSBC' - 94 Albany Rd, Roath Cardiff, South Glamorgan CF24 3RT
Sort Code	40-16-35
Account No.	21751972

Your Full Name	
Your Bank A/C No.	
Your Sort Code	

Your Signature:

Date:

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92 Broadway, Adamsdown, Cardiff CF24 1NH  @alikhlascec  www.alikhlas.org

