

## Mandate Form

Complete this form to register new or changed details of correspondence, and/or signatories

**This form replaces any existing Mandate held by the CFB**

Please complete this form in BLOCK CAPITALS and return original document to CFB.

### CFB Account Details

Account Number

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Account Name

### Details of Nominated Bank Account for BACS Withdrawals

Withdrawals from your CFB account will be paid to the nominated bank details given here i.e. to your local clearing bank

For security purposes **please verify new bank details by attaching a paying-in slip** from your clearing account

Please advise us if these details change

Sort Code

		-			-		
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Account No

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Bank Name & Branch

Account Name

### Registered Correspondent Name & Address to which all communications are to be sent

Name

Address &  
Post Code



Email

Daytime tel.

Online access required Y/N?

### Authorised Signatories

Any of the following persons are authorised to sign withdrawal & transfer forms relating to the above CFB account

Please supply a minimum of **two** signatories. One signature is sufficient to make a withdrawal.

Please advise if you require two signatures on any withdrawal

1 Name

2 Name

Signature

Signature

3 Name

4 Name

Signature

Signature

### Verification

I verify the above changes in correspondent and/or signatories

Retiring Correspondent  
or Retiring Signatory

or

Minister, Superintendent Minister or  
Trustee

Name

Name

Signature

Signature

Date

Date