

Bank Transfer Mandate



Member Details:

CU account number	
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Member Name	
House/Flat Number	
Address Line 1	
Address Line 2	
Address Line 3	
Postcode	

Bank Details of Member:

Bank Sort Code

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Bank Account Number

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I authorise Clackmannanshire Credit Union, on receipt of a request from me, to transfer various sums from my Credit Union account to my designated bank account detailed above.

e-mail address	
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I understand:-

- that any such request must be made by email sent from the email address that is detailed on this form and that this email address will be registered to my Credit Union account.
- that money will only be transferred to the bank account detailed on this form and that if I wish to change those details I must complete a new Mandate form.
- that any such request will only be actioned if I have sufficient available funds in my Credit Union account.

Signature of Member: _____

Signature of Witness: _____ Date: ____/____/____
(CU Officer)

Office use only:

<i>Action</i>	<i>Initials</i>
<i>Member ID attached</i>	
<i>Fedcomp updated</i>	

<i>Action : Bank of Scot.</i>	<i>Initials</i>
<i>CU 1 setup</i>	
<i>CU 2 checked</i>	