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| Payment by Bank Automated Clearing System (BACS) | | | | | | | | | |
|  | |  | |  |  |  |  |  |  |
| **Please complete your details - we need this information to make payments** | | | | | | | | | |
|  | |  | |  |  |  |  |  |  |
| Name of Lead Ukrainian Guest: | | |  | | | | | | |
| Name of Lead Sponsor (payee): | | |  | | | | | | |
|  | |  | | | | | | |  |
| Address |  | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |
|  | | | | | Postcode |  | | |
| Telephone no |  | | | | | | | | |
| Email Address |  | | | | | | | | |
| **Please arrange to make future payments via BACS to the following account** | | | | | | | | | |
| Bank name | |  | | | | | | | |
| Branch Address | |  | | | | | | | |
| Bank sort code | |  | | | | | | | |
| Bank account no | |  | | | | | | | |
| Account name | |  | | | | | | | |
| Signature | |  | | | | | | | |
| Name in block capitals | |  | | | | | | | |
| Date | |  | | | | | | | |
| Supplier Number | | (for office use) | | | | | | | |