

CONTINUOUS TRANSFER AUTHORITY

Account Name:

Account Number:

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We request the regular transfer of funds from our Unity Trust Bank Account (numbered above) to our ALTO Wex Europe Account.

	AMOUNT IN FIGURES	AMOUNT IN WORDS
The sum of...	£ e.g. 1,000	e.g. One thousand pounds

Commencing...

DATE
e.g. 01/02/2010

Continuing...

FREQUENCY
e.g. monthly, weekly, half-yearly

Until...

DATE *
e.g. 01/02/2011

* If left blank, we will continue with the transfer until further notice.

Please cancel any previous continuous transfer authority we have submitted from the above account.

Declaration and Consent

To be signed by the authorised signatory / signatories in accordance with the bank account mandate

Signature 1
Print name:
Date

Signature 2
Print name:
Date

Signature 3
Print name:
Date

Signature 4
Print name:
Date

BANK USE ONLY	Set Up Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>									ALTO Account Number <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>								