

Cardholder amendment



For Bank of Scotland Corporate MultiPay
(programme administrator use only)

Useful information

Please write clearly in the white spaces with capital letters or cross the boxes.

Once completed please send to:
Bank of Scotland Card Services, PO Box 6061, Milton Keynes, MK7 8LE.

1

Type of card

Which type of card do you have?

Corporate MultiPay

2

Amendment to cardholder details

Cardholder account number

Existing details

Title

Mr

Mrs

Miss

Ms

Other (please specify)

Cardholder's full name

Contact numbers and area dialling codes

Home

Work

Fax

Mobile

E-mail address

Staff number

New details

Title

Mr

Mrs

Miss

Ms

Other (please specify)

Cardholder's full name

Contact numbers and area dialling codes

Home

Work

Fax

Mobile

E-mail address

Address (for correspondence)

Postcode

If you have changed your name, is a new card required?

Yes

No

New name to appear on card (maximum of 21 characters including title and spaces)

Cash withdrawals
(if allowed under scheme restrictions)

Yes

No

Monthly cardholder limit (please leave blank if no change is required)

£

Single transaction limit(s) (please leave blank if no change is required)

£

Cancellation of existing cardholders

Please ensure that any recurring transactions relating to these cardholders' cards are cancelled.

Cardholder account number

Card
destruction
confirmed

Your agreement with us

This form must be signed by a programme administrator.

--	--	--	--	--	--	--