



**MARKET DRAYTON MARKET LTD**  
**Barbers Auctions**  
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## **BACS FORMS**

(to be completed in full and signed if you wish to be paid by BACS)

**NAME :** .....

**ADDRESS** .....

.....

.....

..... **POST CODE** .....

**TELEPHONE** .....

**MOBILE** .....

**E-MAIL** .....

**ACCOUNT NUMBER** .....

**SORT CODE NUMBER** .....

**BANK NAME** .....

**ADDRESS** .....

.....

.....

**SIGNED** ..... **DATE** .....

**BACS Payment Will Be Made 10 Days From Date of Sale.**