

STANDING ORDER MANDATE

PLEASE DO NOT SEND TO YOUR BANK

Once completed, please return to: Community Awareness, PO Box 99, Moreton in Marsh, GL56 9XY

| Title: | First Name: | | Last Name: | | |
|--|----------------|---------------------------------|------------|------------------------------|--|
| Address: | | | | | |
| Telephone: | | Email Address: | | | |
| o the Manager | | | | | |
| Name of Bank/Bui | Iding Society: | | | | |
| Address: | | | | | |
| | | | Post (| Code: | |
| Name(s) of Accou | nt Holder(s): | | | | |
| Account Number: | | | | | |
| Sort Code: | | | | | |
| Signature(s): | | | Date: | | |
| Reference (office (| use only): | | • | | |
| Please pay: Lloyds For the credit of: C | | t Code: 30 95 75 Accoun | t Numb | oer: 34853868 | |
| The sum of (in words): | | | £(| £ (in figures): | |
| On the: | (day) | (mon | th) | (year) | |
| And thereafter every Please delete as a | | rter / year until further notic | e and d | ebit my account accordingly. | |

Gift Aid Declaration

I would like tax to be reclaimed on my donation under the Gift Aid Scheme. I am a UK taxpayer and pay an amount of income tax and/or capital gains tax at least equal to the tax that can be reclaimed on my donation.

I would like this donation to be treated as a gift Aid Donation. YES NO