Wimbledon foodbank
59 High Path
London
Wimbledon SW19 2JY

T 020 8544 0126
E wimbledonfoodbank@gmail.com
www.wimbledon.foodbank.org.uk

I believe in restoring dignity reviving hope

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giftaid it

Gift Aid Declaration
for individual UK tax payers (complete in CAPITAL letters)

GAD2015M

Style/Title (Mr/Mrs/Miss, etc)	FIRST names	SURNAME

HOME Address
_____

_____POSTCODE _____

(OPTIONAL INFORMATION - completion indicates that you do not mind us contacting you in this way)

Email address:_____ Telephone: _____

I wish Elim to treat as Gift Aid, all donations I have made since 6 April 2012/ _____ (dd/mm/yyyy) and all donations which I make hereafter.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I give.

Signature | | *Date* | |

Elim Foursquare Gospel Alliance Registered Charity 251549 (England & Wales) SC037754 (Scotland) IR Charities Ref X40109

Elim

EFGA re Wimbledon Foodbank

CW010	Local Supporter Number (Allocated by local church)		Gift Aid Declaration Number (Allocated by Head Office)	

- ✂

Standing Order form

(Please enter name and address of your bank)

To: _____**Bank plc**

_____

_____

_____

_____

Please pay to:

A/C Name   **EFGA re: Wimbledon Foodbank**
A/C Number   **19030665**
Sort Code   **60 05 16**
Bank   **NATWEST**
Branch Name **Cheltenham**

Pay on ___ / ___ / ____ (dd/mm/yyyy) **and monthly thereafter, the amount of £**

Say (amount in words): _____

Until further notice, **quoting ref: GIFTAID/_____** **(Payment will continue until you cancel this instruction)**

Account name:	Signature(s)
	1.

Bank Account Number	Sort Code
	- -

2.