

STANDING ORDER MANDATE

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Office Use Only

DIOCESE OF MOTHERWELL

St Augustine's Coatbridge

Charity Reference Number SC011041

GIFT AID DECLARATION

I,

of

Postcode

confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each year (6 April to 5 April) that is at least equal to the amount of tax that all the charities 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 that the charity will reclaim 25p on every £1 that I give on or after 6 April 2008.

Signed _____ Date _____

National Insurance Number

I promise to contribute a sum equal to £ per month

Notes

Please ensure that you have entered your Postcode above.

If you know your National Insurance Number, please enter it in the space provided.



Return entire form to St. Augustine's Church, 12 Dundyvan Road, Coatbridge ML51DQ

Your Bank/Building Society details:

Name of Bank _____

Address of Bank _____

Payment details:

Please debit my account and pay to the parish account shown below

Account No: _____ Sort Code: _____

The sum of £ _____ on _____ and Monthly/Quarterly/Yearly thereafter until notified

Office Use Onl

My Name

My Address

Signed _____ Date _____

Parish Bank details:

Please pay to the account of (Account Name) RCDM ST AUGUSTINE'S COATBRIDGE

Account No: 00244664 Sort Code: 80-12-97

at (Name of Bank): Bank of Scotland

Address of Bank: The Quadrant Centre, Coatbridge ML5 3EF

Please cancel any previous Standing Order in favour of the above account.