



# Standing Order Mandate

The Manager

\_\_\_\_\_ (Bank Name)

\_\_\_\_\_ (Full Address)

\_\_\_\_\_ (Postcode)

(Please complete your Bank details)

Your Account Details:

Name:

Address:

Sort Code:

Account Number:

Charity Account Details:

Please credit the Account of : MedEquip4Kids

Bank: Barclays Bank plc, 25 High Street, OLDHAM OL1 3AZ

Account Details: Sort code: 20-64-12 Account Number: 10197270

MedEquip4Kids Ref: ID

Payment Details:

Amount

Frequency (e.g. monthly)

Please confirm amount in words:

Payment to start on (date):

Customer signature:

Date:

Please complete all grey boxes, and return this form to MedEquip4kids.

If Gift Aid is applicable, please complete declaration on the reverse of this form. Thank You

# giftaid it

Using Gift Aid means that, for every pound you give, we get an extra 25 pence from the Inland Revenue. This means your donation can go much further. For instance, every £1.00 donated can be turned into £1.25 just as long as donations are made through Gift Aid.

If you are a UK Tax Payer, we can increase the value of your gift at no cost to you!  
You must pay an amount of Income/Capital gains tax at least equal to the tax the charity reclaims on your donations in the tax year

Just complete the Declaration at the bottom of this page. We will then claim the extra monies direct from the Inland Revenue to maximise your donation.

If your circumstances change and you no longer pay tax or wish to cancel your gift aid declaration, please notify us in writing.

## **GIFT AID DECLARATION:**

Please read the notes above and complete below if applicable.

I am a UK tax payer and I would like all the donations I make from the date of this declaration to qualify for gift aid until I notify you otherwise.

Name  
Address

SIGNATURE \_\_\_\_\_

DATE:        /        /