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Standing Order Mandate

Blackburn.foodbank.org.uk

Please pass this form onto the foodbank, using the foodbank's address at the bottom, who will save a copy for their records.

They will then send it onto your named bank or building society.

Branch ac	ddress	
Town/City		Postcode
Please pa	y Blackburn Foodbank,	
Sort code:	0 1 - 0 0 - 8 5 Account nu	mber: 1 4 6 7 8 2 1 7
The sum of:	(in figures) (in words)	
On the:	D D / M M / Y Y Y	Each: Week Month Year
Until furth	er notice and debit my account accordingly.	
Name of a	ccount to be debited:	
Sort code:	Account nu	mber:
Signature	e(s)	Date//
Title	First name	Last name
Home addres	ss	
Town/city		Postcode
Email addres	is	
Mo would be	ove to keep you up to date with information about I	Disakhurn Faadhank Disasa tiskusur proferenses
		ish to receive future communications from Blackburn Foodbank
		672756 or emailing us at info@blackburn.foodbank.org.uk
Data protec	tion	
vara protec	LIOII	d will process your personal data in accordance with current Data Pro

Tick to boost your donation by 25p of Gift Aid for every £1 you donate.

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

I want to Gift Aid my donation and any donations I make in the future or have made in the past four years.