GIFT AID DECLARATION

ROMAN CATHOLIC DIOCESE OF SOUTHWARK

ENGLISH MARTYRS - STROOD

TITLE:	(Mr/Mrs/Miss/M	ls) (Please dele	te as appropriate)
SURNAME:	(Block Capitals))	
FORENAME(S):	(Block Capitals))	
HOME ADDRESS:	(Block Capitals))	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	POST	CODE:	
Telephone No(s)			
E-Mail Address			
Please treat:			
* all gifts of mone	ey that I make to	day and in the fut	ture as Gift Aid donations; OR
* all gifts of money that I have made in the past 4 years and all future gifts of money			
	•	declaration as Gif	,
*(Please tick the appropr	iate box)		
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 to HMRC. Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.			
Ciam atuma		Dete	
Signature		Date	
Please notify the cha 1 Want to cancel this 2 Change your name 3 No longer pay suffice	declaration. or home address.	ome and/or capital ga	ins.
	l your Gift Aid donat		t to receive the additional tax relief due to sessment tax return or ask HM Revenue
Parish Code:	KA Env. N	No.	GAD No.

Oct 12