

STANDING ORDER FORM

PLEASE COMPLETE, SIGN, DATE AND RETURN TO:

Dementia Support South Lincs

Wake House, 41 North Street, Bourne, PE10 9AE

To: The Manager.....Bank plc

.....

..... Postcode.....

*delete as appropriate

Please pay the sum of £.....per month/quarter/year*

Starting on...../...../20.....and until further notice to:

Nat West Bank	Account name: Dementia Support South Lincs
Market Place	Sort Code: 51-81-10
Spalding	Account no: 84054999
PE11 1ST	IBAN: GB85 NWBK 5181 1084 0549 99

Your bank a/c no.....Sort code...../...../.....

Your name.....

Address.....

.....Postcode.....

Signature.....Date.....

Our reference.....(FOR OFFICE USE ONLY)

GIFT AID DECLARATION “I am a UK tax payer and would like Dementia Support South Lincs to treat this donation and all donations I make in the future as Gift Aid donations, until I notify you otherwise. I understand that I must have paid sufficient income tax or capital gains tax during the relevant tax year to cover the amount Dementia Support South Lincs reclaims on my donation.”

Tick here if Dementia Support South Lincs may reclaim tax on your donations

Signature.....Date.....