

# **Black Country Food Bank**

**Gift Aid Declaration** 

(Recurring Donations)

Black Country Food Bank Limited
The Storehouse
Albion Street
Brierley Hill
West Midlands
DY5 3EE

Tel: 01384 671250 email: finance@blackcountryfoodbank.org.uk

UK Registered Charity No 1136676 UK Company No 06986325

#### **Black Country Food Bank**



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### Gift Aid Declaration - Multiple Donation

Boost your donation by 25p of Gift Aid for every £1 you donate

Gift Aid is reclaimed by the charity from the Income Tax and/or Capital

| Gains Tax you pay for the current tax year(6 April to 5 April). Your address needed to identify you as a current UK taxpayer.  |
|--|
| In order to Gift Aid your donation you must tick the box below:  |
| I want to Gift Aid my donation of <b>£</b> and any donation I make in the future or have made in the past 4 years to:  Black Country Food Bank.  |
| I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claime on all my donations (to charities including churches and to Community Amateur Sports Clubs) it is my responsibility to pay any difference. |
| My Details   |
| Title First name or initial(s)   |
| Surname  |
| Full home address  |
|  |
| Postcode   |
| Date Signed  |
|  |

## Please notify Black Country Food Bank if you

- Want to cancel this declaration
- Change your name or home address
- o No longer pay sufficient tax on your income and/or capital gains. If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your

Self Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

Please give Gift Aid Declaration to Black Country Food Bank

Postcode

# **Standing Order**

| Bank Name   |             |                          |                     |            |    |
|---|-------------|--------------------------|---------------------|------------|----|
| Bank address _  |             |                          |                     |            |    |
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| Please quote no Name of Account Code  | unt to be [ | Debited Account I        | Number              |            |    |