Standing Order Form

Return to the Treasurer:
Mrs L. Kowol
The Old Dovecote
Ledwell
Chipping Norton
OX7 7AN

TO THE MANAGER (print the name and full address of your bank)

	start date	
and a like sum	every month/quarter/year*	
	up to and including* or until further notice* (*delete as appropriate)	
	and cancel my existing standing order for £	per
Account Holder(s)		
Account Number	Sort Code	
Name		

Signature

Date

Date

Address

Gift Aid Declaration

					0						
Signed	I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year that is at least equal to the amount of tax that all the charities that I donate to will reclaim on my gifts for that tax year.	All donations I have made in the last six years and all donations I make from the date of this declaration until I notify you otherwise.	All donations I make from the date of this declaration or until I notify you otherwise.	want the Parochial Church Council to treat as Gift Aid Donations: (tick as appropriate)	0				of	I (Mr/Mrs/Miss/Ms/other)	For GREAT TEW
	ome Tax and/or equal to the will reclaim on	all donations I y you otherwise	ion or until I	onations: priate)	(Email)	(Tel)	(Post Code)	(Address)		(Full Name)	(Parish Name)

the sum of

in words

at

NAT WEST

Sort Code: 52-21-31 ACCOUNT No: 1659706

CHIPPING NORTON

PLEASE PAY TO GREAT TEW PCC NO. 2 ACCOUNT