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## **Standing Order Mandate**

Bedford.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.

Name of y	Idross
Branch ac	aress
Town/City	Postcode
Please pa	y Bedford Foodbank,
Sort code:	6 0 - 0 2 - 1 3 Account number: 6 2 4 2 3 2 5 8
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	count to be debited:
Sort code:	Account number:
Signature	(s) Date//
Title	First name Last name
Home addres	is
Town/city	Postcode
Email addres	5
	ove to keep you up to date with information about Bedford Foodbank. Please tick your preference:  I do not wish to receive future communications from Bedford Foodbank
	ge your preferences any time by contacting us on 01234 268569 or emailing us at info@bedford.foodbank.org.uk
Data protec	tion
Foodbank colle	ank is committed to protecting your privacy and will process your personal data in accordance with the Data Protection Act 1998. Bedicts information to keep in touch with you and supply you with information relating to our work. Bedford Foodbank will never sell or passes who isn't directly working on our behalf. A full data privacy statement for financial donors is available from the foodbank on request

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.