



Benevolence Fund

Charity Registration Number: 1113995

Standing Order Mandate

1. Your Gift

Please pay the European Benevolence Fund £ _____ I wish to pay monthly/annually, starting from _____ / _____ 200__ (Delete as appropriate) I wish my donation to be made on the 3rd 10th 17th 25th (Circle as appropriate).

2. Gift Aid

I am a UK taxpayer and I want the European Benevolence Fund to treat all donations I have made since 6 April 2000, and all donations I make from hereafter, as Gift Aid donations.

*You must pay an amount of the UK tax at least equal to the tax the EBF reclaims on your donations.

3. Your Details

Title _____ Initial _____ Date of birth _____ / _____ / _____

Name _____

Address _____

Postcode _____

4. Your Bank/Building Society Details

a) Name and full postal address _____

Postcode _____

b) Account to be debited: Sort Code: _____ Account Number: _____

c) Beneficiary's Details: Account Name: **'The Benevolence Fund'**, Bank Name: NatWest Bank,

Branch Sort Code: 60 – 04 – 23,

Account Number: 89 61 86 61

5. Date of next regular payment

Until you receive further notice from me/us in writing, please debit my/our account accordingly.

Signature(s): Date: