

Standing Order Mandate

foodbank@cheltenhamelim.org

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.

	your bank	
Branch ac	ddress	
Please pa Sort code: The sum of: On the: Until furth	Town/City Postcode	
Please pa	y Cheltenham Foodbank,	
Sort code:	6 0 - 0 5 - 1 6 Account number: 5 2 4 4 7 8 9 8	
The sum of:	(in figures) (in words)	
On the:	D D / M M / Y Y Y Y Week Month Year	
Until furth	er notice and debit my account accordingly.	
Name of a	ccount to be debited:	
Sort code:	Account number:	
Signature	Date//	
Title	First name Last name	
Home addres	ss	
Town/city Postcode		
Email addres	55	
We would lo	ove to keep you up to date with information about Cheltenham Foodbank. Please tick your preference:	
	and Post Email Post I do not wish to receive future communications from Cheltenham Foodbank age your preferences any time by contacting us on or emailing us at 01242 570080 foodbank@cheltenhamelim.org	
Data protec		
Cheltenham Fo	podbank is committed to protecting your privacy and will process your personal data in accordance with the Data Protection Act 1998. Toodbank collects information to keep in touch with you and supply you with information relating to our work. Cheltenham Foodbank will ar details to anyone who isn't directly working on our behalf.	
gifta	Tick to boost your donation by 25p of Gift Aid for every £1 you donate. I want to Gift Aid my donation and any donations I make in the future or have made in the past four years. 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.