



M.A.D.4Kids SUPPORT FUND - CONFIRMATION ADVICE

(Please send to Sharon and Gareth Vaughan, 7 Cyncoed Crescent, Cyncoed, Cardiff. CF23 6SW or by e-mail to g.vaughan@hotmail.co.uk)

GIFT AID DECLARATION

I/We confirm that I/we wish to make a donation to M.A.D.4Kids of £ per month

Title.....Forename(s).....

Surname.....

Address.....Postcode.....

e-mail address.....

- I am a UK taxpayer and wish M.A.D.4Kids to treat this as a Gift Donation and reclaim tax on this donation.(Please tick if you wish us to claim Gift Aid on your donation) .

I understand that if I pay less income Tax and/or Capital Gains Tax in the current year than the amount of Gift Aid claimed on all my donations, it is my responsibility to pay the difference.

Signature.....

Date.....

M.A.D.4Kids Registered Charity No 1180390

STANDING ORDER MANDATE New instruction

To Bank Plc

Account to be debited:

Sort Code Account number

Account name

Beneficiary Details:

Bank: HSBC Branch Details : 56 Queen Street, Cardiff.

Sort Code: 401615 Account Number 84126041

Beneficiary Name: M.A.D.4Kids

Reference : SGV

Payment Details:

Amount of payment (please tick) £2 £5 £10 Other.....

First Payment Date.....

Amount of payment in words

To be paid: Monthly, on the first day of each month

Please continue payment until further notice.

Donor signature(s) Date

Donor contact telephone number