

Standing Order Instruction Form

Please complete ALL boxes where indicated with an asterisk * below, using block capitals. (Beneficiary is the person receiving the payment.

А	ccount Holders Sort Code *			-			-					
	Account number *											
Account Name *												
Date *												
Contact Telephone No. *												
New	Ins	tru	ıcti	on								
Name of Beneficiary			Hull & East Riding Breast Friends									
Beneficiary Reference (Reason for payment e.g. Donation / Membership)												
Beneficiary Sort Code			40 – 25 – 49									
Beneficiary Account number			10146773									
Amount												
Amount in Words												
Date of first payment												
Amount of subsequent payments (if different from above)												
Amount of subsequent payments in words												
Due date and frequency of payments												
Date of final payment						Or Until Further Notice						
Special Instructions (where the above boxes do not cover the specific instructions												
Signature				Dat	е							
I am a UK Tax Payer and would like to claim Gift Aid Please tick this box If you are a UK Tax payer HER Breast Friends can claim Gift Aid on donations you make to the Charity. This includes your membership fees. It costs you nothing and the Government gives us back money in return for every £ you donate. You must pay an amount of income or capital gains tax at least equal to the tax the charity reclaims. Please notify the Charity if you: 1. Want to cancel this declaration. 2. Change your name or home address. 3. No longer pay sufficient tax on your income and/or capital gains tax. When you have completed the Standing Order Form please send to:												
HFR Breast Frier												

When you have completed the Standing Order Form please send the HER Breast Friends
Chamberlain Business Centre
Chamberlain Road
Hull
HU8 8HL