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## Gift Aid declaration

Charity:

**The League of Friends of Fairford Hospital (Charity No. 1006416)**

**Please treat**

The enclosed gift of £ ----- as a Gift Aid donation; **OR**

All gifts of money that I make today and in the future as Gift Aid donations

***Please tick the appropriate box***

You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that the charity will reclaim on your gifts for that tax year.

### Donor's details

Title ----- Initial(s) ----- Surname -----

Home address -----  
-----

Postcode ----- Date -----

Signature -----

**Please notify the charity if you:**

- Want to cancel this declaration
- Change your name or home address
- No longer pay sufficient tax on your income and/or capital gains.

The charity will reclaim 25p of tax on every £1 you give. **If you pay Income Tax at the higher rate**, you must include all your Gift Aid donations on your Self Assessment tax return if you want to receive the additional tax relief due to you.

**Please sent this form with your donation to:**

Mr Paul O'Shaughnessy, Scissor Cottage, Turville Barns, Cirencester, Glos. GL7 3QB