

Standing Order Form

Do not send this form to your bank.

Please return it to:

Sophie's Fund
c/o Uttlesford Citizens Advice
Barnards Yard
Saffron Walden. CB11 4EB

Email: info@sophiesfund.org



Helping Local People in Need

To: The Manager of (Name of your bank)
Bank Address:
Post Code:

Account Holder's Name and Address

Full Name:
Address:
Post Code:

Please pay Sophie's Fund Uttlesford the sum of

£

Monthly quarterly on per annum Date of first payment
(please tick frequency)

Sort Code:

Account Number:

Payable to:

Barclays Bank Ltd

Account Name: **Sophie's Fund Uttlesford**

Sort Code: 20-45-45

Account Number: 63218457

Quoting Reference

(to be completed by Sophie's Fund)

Signature of account holder:

Date:

 / /

giftaid it

YES Please treat as Gift Aid donations all qualifying gifts of money made to Sophie's Fund, (please tick all boxes you wish to apply);

today in the past 4 years in the future

I confirm I have paid or will pay an amount of Income Tax and / or Capital Gains Tax for each tax year that is at least equal to the amount of tax that Sophie's Fund will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council tax do not qualify. Please remember to notify Sophie's Fund if your circumstances change and you no longer pay an amount of tax equal to the tax that Sophie's Fund reclaims.