

Standing Order Form

To The Manager; Bank/Building Society.

Address:

Postcode:

Please pay: **Barclays Bank Plc.**
8-14 Darwen Street
Blackburn

Sortcode: 20-09-72

A/C No: 40041998

Acc Name: Churches Child Protection Advisory Service

The sum of £ Every: Month Quarter Year

Starting:

Account Number:

Sortcode:

Account Name:

Signature:

Date:

Name:

Address:

Postcode:

CCPAS send out a quarterly magazine called 'Caring', if you would like to receive this please tick the box.
If you already receive this or do not want your information added to our mailing list then please do not tick the box.

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I want CCPAS to treat all donations I have made for this tax year and the four years prior to the year of the declaration, and all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations.

You must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that the charity reclaims on your donations in the appropriate tax year (currently 25p for each £1 you give.)

Tax-payers Signature:

Date: _____