



Registered Charity No. 1002926

INCREASE THE VALUE OF YOUR DONATION WITHOUT SPENDING A PENNY MORE!

If you are a UK taxpayer please complete the declaration below to allow us to reclaim the tax you have already paid on your donation made to us. (Currently 25p for every £1 you give).

| (Please complete in BLOCK CAPITALS) | |
|--|--|
| Title Forename | |
| Surname | |
| Home address | |
| | Postcode |
| I want to Gift Aid my donation and want Cynthia Spethat I have given on this date, in the past four years understand that if I pay less Income Tax and/or Calaimed on all my donations in that tax year it is me | s and in the future. I am a UK taxpayer and apital Gains Tax than the amount of Gift Aid |
| Signature | Date |
| Please contact the Fundraising Department if you: | |
| Change your name or your address. | |
| No longer pay tax on your income or Capital gains. | |
| Wish to cancel your Gift Aid declaration | |
| | |
| Please return this form to: | Reference: |
| The Fundraising Office | |
| Cynthia Spencer Hospice Manfield Health Campus | |

Kettering Road

Northampton NN3 6NP

Gift Aid form October 2015