REIGATE AND BANSTEAD WOMEN'S AID

Freedom from abuse

RBWA
FREEDOM FROM ABUSE

SPONSORSHIP AND GIFT AID DECLARATION FORM.

Name: Event:

We, who have given our names and addresses below, and who have ticked the box entitled 'Gift Aid', want the above charity to reclaim tax on the donation detailed below, given on the date shown. We understand that each of us must pay income tax on the donation detailed below, given on the date shown. We understand that each of us must pay income tax or capital gains tax equal to the tax reclaimed by the charity on the donation. (This statement only applies if you tick the 'Gift Aid' box and refers to tax already paid/due).

Full Name (please print)	Address	Post Code	Amount Pledged	Amount Given	Date Given dd/mm/yy	Gift Aid please tick
			Total Donations c/f			
			Total donations qualifying for Gift Aid c/f			

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Name: Event:

Full Name (please print)	Address	Post Code	Amount Pledged	Amount Given	Date Given dd/mm/yy	Gift Aid please tick

Total Donations c/f

Total donations qualifying for Gift Aid c/f

Total donations including all c/f

Total donations qualifying for Gift Aid including all c/f

Date returned