

## **Standing Order Mandate**

www.southsefton.foodbank.org.

Please pass this form onto the foodbank, using the foodbank's address at the bottom, who will save a copy for their records.

They will then send it onto your named bank or building society.

Name of your bank	
Branch ad	Idress
Town/City	Postcode
Please pa	y St Leonard's Youth & Community Centre
Sort code:	2 0 - 1 0 - 8 4 Account number: 9 0 9 9 7 8 0 3
Town/City Please par Sort code: The sum of: On the: Until further	(in figures) (in words)
On the:	D D / M M / Y Y Y Each: Week Month Year
Until furth	er notice and debit my account accordingly.
Name of a	ccount to be debited:
Sort code:	Account number:
Signature	Date/
Title	First name Last name
Home addres	55
Home addres  Town/city	Postcode
Email addres	s
	ove to keep you up to date with information about the South Sefton Foodbank. Please tick your preference:  and Post Email Post I do not wish to receive future communications from South Sefton Foodbank
You can chan	ge your preferences any time by contacting us on 0151 933 1300 or emailing us at info@southsefton.foodbank.org.uk
Protection leg work. To unsu	tion  Foodbank is committed to protecting your privacy and will process your personal data in accordance with current Data is lateral process. South Sefton Foodbank collects information to keep in touch with you and supply you with information relating abscribe from our newsletter, send a message to the email address above with the word unsubscribe in the subject line. A statement for financial donors is available from the foodbank on request.
gifta	Tick to boost your donation by 25p of Gift Aid for every £1 you donate.  I want to Gift Aid my donation and any donations I make in the future or have made in the past four years.  I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.