



GIFT AID DECLARATION FORM

Please find enclosed my donation of £.....

Please treat as Gift Aid donations, all qualifying gifts of money made

today in the future * in the past 4 years **

I confirm I have paid or will pay an amount of UK Income Tax and/or Capital Gains Tax for the current tax year (6 April to 5 April) that is at least equal to the amount of tax that all charities and Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for the current tax year. I understand that other taxes, such as VAT and Council Tax, do not qualify. I understand the charity will reclaim 25p for each £1 that I have given.

*I understand that the charity will reclaim 25p on every £1 that I give after 6 April, 2008.

**I understand that the charity will reclaim 28p on every £1 that I gave up to 5 April, 2008.

Name Surname

Address

Postcode Telephone

Signature..... Date

Please notify the St John of Jerusalem Eye Hospital Group if you:

- want to cancel this Declaration;
- change your name or home address;
- no longer pay sufficient tax on your income and/or capital gains.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

giftaid it