

Standing Order Mandate

woking.foodbank.org.uk

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.

	Branch address																
	Town/City						Postcode										
Instruction to your bank manager	Please pay W	oking Foo	dbank,														
	Sort code:	4 0	- 5	2	- 4	0	Account nun	nber: 0	0	0	3	3 4	1 8	;	2		
	The sum of:	(in figure	s)	(in words)	words)												
	On the:				M /			Eac	h:	Wee	k	Mon	ith	Yea	ar		
	Until further notice and debit my account accordingly.																
	Name of account to be debited:																
	Sort code: Account number:																
	Signature	s)						Date			/			/		••••	
	Title	e First name						Last name									
	Home address																
	Town/city							Postcode									
	Email address																
, and the second	We would lo	ve to kee	p you up t	o date	e with i	nforma	ation about W										
	Email and Post Email Post I do not wish to receive future communications from WokingFoodbank You can change your preferences any time by contacting us on 07896077760 or emailing us at info@woking.foodbank.org.uk																
	rata protection																

statement for financial donors is available from the foodbank on request.

C	Tick to boost your donation by 25p of Gift Aid for every £1 you donate.						
giftaid it	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 responsiblity to pay any difference.						