

## Standing Order Mandate rotherham.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				
Please pay Rothe	erham Foodbank,						
Sort code: 0	5 _ 0 7 _ 3 2	Account num	ber: 0 9	3 4	8 5 2	0	
The sum (in figu of:	ires)	(in words)					
On the:			Each:	Week	Month	Year	
Until further notic	e and debit my account according	ly.					
Name of account to	be debited:						
Sort code:		Account num	ber:				
Signature(s)			Date				
Title	First name		Last name				
Home address							
Town/city			Postcode				
Email address							
/e would love to k	eep you up to date with information	ation about Ro	otherham Foodba	ınk. Please ti	ck your prefer	ence:	
Email and Post	Email Post		to receive future o				
ou can change your	preferences any time by contacting	us on 01709 37	2104 or emailing u	s at stephen@	rothernam.food	ibank.org.uk	

legislation. Rotherham Foodbank collects information to keep in touch with you and supply you with information relating to our work. To unsubscribe from our newsletter, send a message to the email address above with the word unsubscribe in the subject line. A full data privacy statement for financial donors is available from the foodbank on request.

## 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.

POSTAL ADDRESS: Rotherham Foodbank, Hope Centre, Grove Road, Rotherham S60 2ER

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