

MY GIFT TO ST EBBE'S

Please print clearly and tick all the boxes that apply

SECTION A – NAME AND PERSONAL DETAILS

Title: Mr/Mrs/Miss/Ms/Dr

Full name:

Home Address:

.....

Post Code: Phone:

Email:

I regularly attend the following meeting(s) at St Ebbe's Church:

- | | |
|--|--|
| <input type="checkbox"/> Sunday 9.45am | <input type="checkbox"/> Mid-week group |
| <input type="checkbox"/> Sunday 11.45am | <input type="checkbox"/> Headington |
| <input type="checkbox"/> City Congregation | <input type="checkbox"/> Visitor / friend of St Ebbe's |
| <input type="checkbox"/> Sunday 6.30pm | <input type="checkbox"/> Other..... |

SECTION B1 - MY REGULAR GIFT

- I want to set up/change a Standing Order and have completed Section D of this form, and enclose it attached to this sheet
- I have set up/changed a Standing Order by telephone/Online Banking as follows:
£..... every starting 20.....
under the reference*.....
- I have arranged to give to St Ebbe's via the GAYE scheme as follows:
£..... every starting 20.....

SECTION B2 - MY ONE-OFF GIFT

- I enclose a cheque/charity voucher for £.....
- I have arranged a bank transfer in the amount £.....
under the reference*.....

Bank transfers should be made to the PCC of St Ebbe's Church account, account number 00729507, sort code 20-65-18.

*Please instruct your bank/payroll department to give your name and surname (eg John Smith) as the reference for your gift.

P.T.O.

SECTION B3 – REQUEST FOR INFORMATION

- Please send me details about giving to Friends of St Ebbe’s (FoSE).
- I’d like to talk to someone about making a legacy.
- I can give some of my time to St Ebbe’s – please tell me how I can help.

SECTION C - GIFT AID

- My gift is eligible for Gift Aid and I have completed the Declaration below
- My gift is eligible for Gift Aid and I have previously provided a Gift Aid Declaration in favour of St Ebbe’s Church
- My gift is not eligible for Gift Aid

GIFT AID DECLARATION

(Your address is needed overleaf to identify you as a current UK taxpayer)

I want to Gift Aid this donation and any donations I make in the future or have made in the past 4 years to the Parochial Church Council of St Ebbe’s Church, Oxford (registered charity no: 1127816), until I notify you otherwise.

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. I understand the charity will reclaim 25p of tax on every £1 that I give on or after 6 April 2012.

Signed Date 20.....

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.

Please notify the Financial Administrator 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

In completing any of the sections of this form you agree that St Ebbe’s Church (including PCC & related trusts) may collect, store in any form and use any personal information which you may provide us, for the purposes of administering your gift and complying with any requests for information from HM Revenue & Customs and for the purpose of providing you with information about our current and future activities.

Please ensure that you have completed Sections A, B and C (and D if you are setting up/changing a Standing Order) before returning them to: The Financial Administrator (Private & Confidential), St Ebbe’s Church, 2 Roger Bacon Lane, Oxford, OX1 1QE.

SECTION D - STANDING ORDER for PCC of St Ebbe’s Church, Oxford

Please print clearly

To the Manager of:
(your bank)

Branch address
..... post code

PLEASE PAY

The Parochial Church Council of St Ebbe’s Church, Oxford
Account number 00729507
Barclays Bank PLC (sort code 20-65-18),
Oxford City Branch, Oxford

The sum of £..... (in figures) (in words)

on the day of 20..... (date of first payment) and on the
same day in each succeeding month / quarter / year

formonths / until20..... / or until further notice

(delete / complete as applicable)

Quoting my name and initials as reference

PLEASE DEBIT MY ACCOUNT:

.....
(your bank account number) (your bank sort code)

- Please cancel my existing standing order to St Ebbe’s Church
(tick box if this applies)

Signed Date/..... 20....

Name
(please print your full name clearly, being the name on the account)

Please keep this sheet with your completed Sections A, B and C and return them to:

The Financial Administrator (Private & Confidential),
St Ebbe’s Church, 2 Roger Bacon Lane,
Oxford, OX1 1QE

DO NOT SEND THIS FORM DIRECTLY TO YOUR BANK