

Standing order instruction

TO BE COMPLETED BY THE DONOR

CAF Charity Account number

Name

Address

Postcode

Please make the following payment on my behalf to (minimum £5 a month)

Name of charity

Address

Frequency: Monthly Quarterly Half yearly Annually

Amount £

Starting from / / until / / or until further notice

Reference number or message (if required)

This is an additional instruction This is an anonymous donation
This replaces an existing instruction (*tick as appropriate*)

NB

- 1 The minimum gift by standing order is £5. Gifts for lesser sums can be made by 'charity cheque'.
- 2 Payment will, where possible, be made direct to the charity's bank account under advice. The advice will include your name (or ANON) and optionally a reference number or message.
- 3 If you do not state a date of payment, the gift will be made as soon as there are sufficient funds in your account.
- 4 Accounts may not be used to make payments in respect of goods or services and if funded by Give As You Earn, donations cannot be made to charities based overseas or to pay for membership subscriptions.

Signature Date

PLEASE FORWARD TO YOUR CHOSEN CHARITY (should you wish your donation to remain anonymous please send this form to CAF, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4TA)

TO BE COMPLETED BY THE CHARITY

Name of charity _____

Address _____

Postcode _____

Telephone number _____

Charity Commission/Inland Revenue number _____

Bank/building society _____

Branch name _____

Sort code _____

Account number _____

Reference number/details _____

I confirm that these funds, when received, will be assigned as a gift and not in return for goods, services, school fees, discharge of debts or as a payment, or part payment, under the Gift Aid Scheme.

Name _____ Job title _____

Signature _____ Date _____

NB

Donors may amend or cancel this and any other subsequent payment instruction without further reference to the charity. Any queries should be directed to the donor. [Please forward the completed form to CAF, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4TA](#)

For CAF use only

Date received _____ Approved _____ Return to _____

CN _____ 2xSI _____ Val _____ Prep _____ Proc _____ Ref no _____

Charities Aid Foundation, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4TA
T: 01732 520 055 F: 01732 520 001 W: www.cafonline.org E: charityaccounts@cafonline.org

Registered charity number 268369

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