PROMISE FORM AND GIFT AID DECLARATION

You can alter your giving at any time should your circumstances change

To the PCC of Notti	ngham St Peter an	d All Saints (Charity no. 1130298)
I should like to give	/ I am unable to gi	ve (Please circle as appropriate)
Name	Forenames ift Aid, please enter only	Surname one person's name above)
	Postcode	
I should like to give	£ Each	Week / Month / Quarter / Half Year / Year.
I choose to give by :		
	Bank Standing Ord	er
	Offering Envelopes	5
	Other (Please spec	cify)
the date of every £1 don l am a UK ta Capital Gains in that tax ye Please notify cancel this of	this declaration and in lated. expayer and understand Tax than the amount of ear it is my responsibility the Treasurer of Plar	nned Giving Secretary if you want to r name or home address or no longer
Signature		Date
If you have ticked that yethe form opposite, OR		Bank Standing Order, please complete below, if appropriate.
		payments by phone or internet
There is no change	to my existing Bank S	tanding Order payments.

STANDING ORDER FORM FOR NOTTINGHAM ST PETER AND ALL SAINTS

Please complete this form if there is any change to the amount you wish to give.

To the Manager Bank plc.,			
Address			
Postcode			
Account Number Sort Code			
Name of Accountholder(s)			
Address			
Postcode			
Please pay to: NatWest Bank plc, 16 South Parade, Nottingham. NG1 2JX A/C Name: St Peters and All Saints PCC Account Number 00838993 Sort Code 56-00-61			
Monthly Quarterly Half Yearly Yearly			
(Please circle preference)			
payments of :-			
£poundsp)			
Starting on theday of			
(Please choose a start date at least one month from today to allow time for processing)			
Signed Date			
This Standing Order replaces any existing Standing Order navable to the			

This Standing Order replaces any existing Standing Order payable to the same recipient with effect from the above starting date.