## Regular giving form

Your conta	ct details	Please return this form to your PCC Treasurer, Planned Giving or Gift Aid Officer
Name		-
Address		
Phone		
E-mail		
Your gift		
I wish to dona	te £ per month/quarterly/annuall	y until further notice starting on (insert date)
I would like to	pay by:	
	Order (form below if required)	
Regular er Cheque	nvelopes	
Cheque		. 6 . 1:1
Gift Aid de	claration	giftaid it
Gift Aid unless	· · · · · · · · · · · · · · · · · · ·	s year and all donations in the future to benefit from amount you pay or have deducted in UK income tax or capital gains
Signed	Dated	
Standing C	Order	
Your bank		Your account
Bank name		Sort code
Address		
		Account name
		_
Please pay £ _	per month/quarterly/annually fron	n my bank account (details above) to:
The Church's bank	and account	
Bank account		
Name of bank		_
Sort code Account no		
Starting on	(insert date) until further notice.	
Signed	Dated	