



Action on Addiction

Event

Date _____

Name of participant: _____

Full name <i>First name & surname</i>	Full Home Address <i>Only needed if you are Gift Aiding your donation. Don't give your work address if you are Gift Aiding your donation.</i>	Postcode	Amount £	Date paid	Gift Aid? *
Joe Bloggs	1 Regent Terrace, Rita Road, London	SW8 1AW			✓

*If I have ticked the box headed 'Gift Aid? ✓', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the charity or Community Amateur Sports Club (CASC) named above to reclaim tax on the donation detailed above, given on the date shown. I understand that if I pay less Income Tax / or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand the charity will reclaim 25p of tax on every £1 that I have given.

Please make cheques payable to Action on Addiction

Remember: Full name + Home address + Postcode + ✓ = Giftaid!

Continuation Sheet

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<i>Joe Bloggs</i>	<i>1 Regent Terrace, Rita Road, London</i>	<i>SW8 1AW</i>			✓

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