## I would like to help Campden Home Nursing look after people with incurable illnesses.

CAMPDEN

There are many ways you can directly support u	is:	
Make a one-off donation	HOME	
Donate monthly through Standing Order	NURSINO	}
Leave us a Legacy in your Will (please call u		_
Trusts (please call us on 01386 840505)		
My details are:	Please complete this form and return it to	):
Title:		
Forename(s):	Campden Home Nursing CIO	
Surname: Address:	Camperdene Gallery High Street	
11441 655.	Chipping Campden	
	Gloucestershire	
n . 1	GL55 6AT	
Postcode: Tel:	Tel: 01386 840505 www.campdenhomenursing.org	
Email:	www.campueimomenursing.org	
I wish to	Gift Aid Declaration	
Make a one-off donation of: £	Boost your donation by 25p of Gift Aid f	or
And enclose my cheque payable to	every £1 you donate	
Campden Home Nursing CIO		
Donate £ monthly through a	☐ I wish the charity to treat this	
standing Order, my Bank details are	donation as Gift Aid and to treat similar	ly
as follows:	all future donations that I make to the charity. I am a UK Taxpayer and	
	understand that if I pay less income tax	
Bank Name:	and/or Capital Gains Tax than the	
Bank Address:	amount of the gift aid claimed on all my	
Julia Fladross.	donations in that tax year it is my responsibility to pay any difference.	
Account Name:	responsibility to pay any unference.	
Sort Code:	I declare that I am a taxpayer and I wan	t
Sort Code:	the charity to treat my donation of	
Account Number	£	
	Which I made on the / / (Date of cheque) and any future	
Payments to be made to:	donations I make as Gift Aid Donations	
Campden Home Nursing CIO		
Account: Lloyds TSB, High Street,	☐ I would like Campden Home Nursin CIO to claim the tax back on this	g
Chipping Campden, Gloucestershire,	donation.	
GL55 6HH	Please pay Campden Home Nursing by	
A 1N 1 10	Standing Order from the account detaile	
Account Number 18551160 Sort Code: 30-98-90	on this instruction. I understand that the	iis
5011 Couc. 50-90-90	instruction may remain with Campden Home Nursing and, if so, details will be	
on the of each month until further	passed electronically to my	
notice.	Bank/Building Society.	
	Date:	
	Signature:	