



# DONATION FORM



Many thanks for making a donation to EDP. We are so grateful for your support. Your contribution means that we can offer more opportunities to those who have problems with their drug and alcohol use enabling them to make the next step on their recovery journey.

Please complete and return this form to EDP Drug & Alcohol Services, Suite 2:11, Renslade House, Bonhay Road, Exeter, EX4 3AY

## STANDING ORDER DETAILS

Please pay EDP Drug & Alcohol Services the total sum of £

One off payment  Weekly  Monthly  Quarterly  Annually  \*Please tick as appropriate

Account Number  Sort Code -- Start Date

Bank Name and Address: \_\_\_\_\_

*For Bank use only:* Please set up the standing order and debit my account accordingly.

Pay EDP Drug & Alcohol Services, HSBC, 250 - 251 High Street, Exeter, EX4 3PZ.

Account Number: 61603116 Sort Code: 40-20-30

Please quote reference: \_\_\_\_\_ (Please add your name)

## GIFT AID DECLARATION

If you are a UK taxpayer please use this form to enable EDP Drug & Alcohol Services to claim back the tax you have paid on your donations. Under the Gift Aid Scheme you can make your donation worth more. For every pound you give us, we can get up to an extra 25p from the HM Revenue and Customs at no cost to you. **If you pay tax at a higher rate you can obtain additional tax relief on your donation.**

Please treat this donation and all donations I have made in the last four years as gift aid donations. Please also treat all future donations as gift aid donations until I tell EDP Drug & Alcohol Services otherwise. I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for the current tax year (6 April to 5th April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for the current tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand that the charity will reclaim 28p of tax on every £1 that I gave up to 5 April 2008 and will reclaim 25p of tax on every £1 that I have given on or after 6 April 2008.

Total amount donated: \_\_\_\_\_

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Email: \_\_\_\_\_ Phone number: \_\_\_\_\_

Tax payer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

I do not wish to receive any further information about EDP Drug & Alcohol Services  I would like to receive your newsletter

Please notify EDP Drug & Alcohol Services if you: \* want to cancel this declaration

\* Change your name or address

\* No longer pay sufficient tax on your income and/or capital gains

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Email: [info@edp.org.uk](mailto:info@edp.org.uk)

Phone: 01392 666 710