



# SINGLE DONATION MANDATE

To My Bank Manager			
Bank Name			
Bank Address			
Bank Sort Code		Bank Account Number	
Please Pay			
Payee Bank Name	<b>The Co-operative Bank</b>	Payee Account Name:	<b>HOPEMALAWIUK</b>
Payee Sort Code:	<b>08-92-99</b>	Payee Account Number	<b>65672978</b>
Payment Amount	<input type="checkbox"/> £10 <input type="checkbox"/> £25 <input type="checkbox"/> £50 <input type="checkbox"/> £100 or other amount £ _____		
Date of Payment			
Reference (Office Use Only)			
Your details			
Name			
Address:			
		Post Code:	
Signature:			
Email:			

Tick the box to add an extra 20p to every £1 you give at no extra cost

### Gift Aid Declaration

*giftaid it*

Yes, I pay tax in the UK. Please treat all donations I make or have made to HOPEmalawiUK for the past four years and future as gift aid donations until further notice.

(You must pay income tax/capital gains tax at least equal to the amount of the tax reclaimed on your donations)

**This form should be completed and returned to HOPEmalawiUK, 17 Glantwy, Ferryside, Carmarthen SA17 5TG**