



**THE MOSAIC
COMMUNITY
TRUST**

Return this form, completed, to -
The Mosaic Community Trust
61A Warwick Avenue
London W9 2PR

STANDING ORDER FORM

Name:	
Address:	
Town/ County:	Post Code

Request you to pay to: **The Mosaic Community Trust**

Bank Name: HSBC ♦ **Account Number:** 72256584 ♦ **Sort Code:** 40-01-06

Branch Address: 90, Baker Street, London W1U 6AX

Please pay **The Mosaic Community Trust** **£15** (tick) each month

Or my preferred amount of £ each month until further notice, and debit the sum of

£

(Amount in words)

(Figures)

Name(s) of Account Holder(s)

Annually / monthly (delete as appropriate)

Starting on the following date →
and continuing until further notice in writing.

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Account No

--	--	--	--	--	--	--	--

Sort code

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Signed: _____ Date: _____

PLEASE INSERT YOUR BANK DETAILS

To The Manager (name of bank):

Bank Address:

Post Code:



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GIFT AID DECLARATION

If you are a UK taxpayer, please also complete a Gift Aid Declaration. This enables us to reclaim tax on your donation. If you are a UK taxpayer, under the Government's Gift Aid scheme **The Mosaic Community Trust** can reclaim the tax you have already paid on your gift. This means that your donation can increase in value by nearly a third at no extra cost to you. *(You must pay an amount of income tax or capital gains tax equal to the tax we reclaim on your donations - 28p for every £1 you give. Please do **not** sign this declaration unless you want us to claim the Gift Aid.)*

Please treat **this and all future donations** I make until further notice as Gift Aided.

I certify that I am resident in the United Kingdom. I understand and willing consent for The Mosaic Community Trust to reclaim tax on my donation through the Gift Aid scheme.

Signed: _____ **Date:** _____

Full Name: _____

Please return this form signed and dated to:

**The Mosaic Community Trust
61A Warwick Avenue
London W9 2PR**