

# PACT Animal Sanctuary

River Farm, Woodrising, Hingham, Norfolk NR9 4PJ

Website : [www.pactsanctuary.org](http://www.pactsanctuary.org)

Email : [info@pactsanctuary.org](mailto:info@pactsanctuary.org)

## STANDING ORDER MANDATE

**This form should be completed and forwarded to PACT (see above for the address)**

| <b>To The Manager</b> |  |
|-----------------------|--|
| Bank Name             |  |
| Bank Address          |  |
| Bank Account Number   |  |
| Bank Sort Code        |  |
| <b>Please Pay</b>     |  |
| Payee Bank Name       | The Co-Operative Bank Plc, 69 London Street, Norwich NR2 1HL |
| Payee Account Name    | People For Animal Care Trust                                 |
| Payee Sort Code       | 08-92-99   |
| Payee Account Number  | 65769904   |
| Payment Amount        | £  |
| Frequency             | Monthly / Quarterly / Yearly (Please delete as appropriate)  |
| Date of First Payment |  |
| <b>Your Details</b>   |  |
| Name                  |  |
| Address               |  |

|  |  |
|--|--|
| Email Address                          |  |
| Can we contact you in future by email? | <input type="checkbox"/> YES <input type="checkbox"/> NO |

|  |  |
|--|--|
| <p>Gift Aid (Please tick box)</p> <p><input type="checkbox"/> YES    <input type="checkbox"/> NO</p> | <p>The Government's Gift Aid scheme lets us reclaim tax on your donations. So for every £1 you give us, we receive 25p back from the tax man - at no extra cost to you. That means we can help even more animals in need.</p> <p>Yes - I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 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 that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 donated after the 5th April 2008. - Please tick YES.</p> |
| Signature:   |  |
| Print Name:  |  |
| Date   |  |

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