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 www.ageconcernluton.org.uk  
 Registered Charity No. 200463

I wish to make a Standing Order to Age Concern Luton of:

£..... /per month/quarter/year\* (\*delete as appropriate)

Signature .....Date .....

**Please return this Standing Order Mandate to Age Concern Luton at the above address.**

**GIFT AID DECLARATION**

Thank you for your generous support. If you pay basic rate income tax we can reclaim the tax on your donation. Please sign the Gift Aid Declaration below if you are able and then **any charitable donation made to Age Concern Luton will be tax efficient.**

"Remember, you must pay an amount of income tax and/or capital gains tax equal to the tax on your donations"

"I am a UK taxpayer. Please reclaim the tax on all my donations to Age Concern Luton. I have made for the six years prior to this year and any I make in the future, until I notify you otherwise. I will advise you if I cease to be a taxpayer, and of any changes to my name and/or address."

Signature..... Date.....

To the Manager of .....Bank plc at (address of bank).....

Sort Code  Account Number

Please pay to account no. 57521226 of Age Concern Luton at Yorkshire Bank (sort code 05-05-66)

the sum of £.....on the .....day of ..... 20.....

and thereafter make monthly/quarterly/annual\* payments of £..... until further notice (\*delete as appropriate)

Name..... Date.....

Address.....

Signature.....

*This standing order supersedes any existing mandate payable to Age Concern Luton*