# Leeds Asylum Seekers’ Support Network Standing Order Form

If you are setting up to make a regular contribution to Leeds Asylum Seekers’ Support Network we would ask you to complete the form below, together with a Gift Aid declaration (for UK taxpayers).

*Please complete in block capitals.*

1. **Your details**

|  |  |  |  |
| --- | --- | --- | --- |
| Title: | Click here to enter text. |  |  |
| First name: | Click here to enter text. | Surname: | Click here to enter text. |
| Address:  | Click here to enter text. |  |  |
| Postcode: | Click here to enter text. | E-mail: | Click here to enter text. |

## 2. Your regular gift

Please pay to Leeds Asylum Seekers’ Support Network, Unity Trust Bank plc,

Nine Brindleyplace, Birmingham, B1 2HB

Bank sort code: 60-83-01

Account no: 20109321

£2 [ ]  £5 [ ]  £10 [ ]  or my preferred amount of £ Click here to enter text.

each month [ ]  / quarter[ ]  / year [ ]  until further notice

starting on: Click here to enter text. (eg 7th December 2014)

|  |  |  |  |
| --- | --- | --- | --- |
| Your Bank Name: | Click here to enter text. |  |  |
| Address: | Click here to enter text. | Postcode:  | Click here to enter text. |
| Account Number:  | Click here to enter text. | Sort code: | Click here to enter text. |

#### 3. Gift Aid declaration

By making a Gift Aid declaration you will allow LASSN to reclaim tax on your donation.

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 that I give.

**I would like Leeds Asylum Seekers Support Network to treat all donations I have made for the last 4 years and all donations in the future as Gift Aid donations until I notify them otherwise. I am a UK taxpayer.

Signature: Date: Click here to enter text.

Please return this form to: **LASSN, 4th Floor, Oak house, Park Lane, Leeds LS3 1EL**