



# Gift Aid Declaration

Details of Donor

(Where both partners in a married couple pay tax, please complete two declarations.)

(PLEASE USE BLOCK CAPITALS)

Mr       Mrs       Miss       Ms       Other  
Forename(s)

\_\_\_\_\_  
Surname

\_\_\_\_\_  
Address

\_\_\_\_\_  
Postcode \_\_\_\_\_ Telephone (including STD code) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

I want The Action on Disability Project to treat as Gift Aid Donations and reclaim tax on:

All donations I have made since 6 April 2000, and all donations I make Hereafter until I notify you otherwise.

The Donation of £ \_\_\_\_\_ which I make on (date) \_\_\_\_\_

You must pay an amount of income tax and/or capital gains tax at least equal to the tax that we reclaim on your donations in the tax year (currently 28p for each £1 you give)

In the event of changes to personal data, please telephone (028) 90236677

Return  
Please return this form in an envelope marked private and confidential to:  
The Action on Disability Project  
689 Springfield Road  
Belfast  
BT12 7FP

**Thank You**

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The Upper Springfield Development Company Ltd, Action on Disability Project, 689 Springfield Road, Belfast, BT12 7FP  
Telephone: (028) 90236677 Fax: (028) 90231074 E-mail: info.aod@usdt.co.uk Website: www.actionondisability.org  
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