

Standing Order Mandate

scunthorpe.foodbank.org.uk

Please pass this form onto the foodbank, using the foodbank's address at the bottom, who will save a copy for their records.

They will then send it onto your named bank or building society.

Name of	your bank	
Branch ac	ldress	
Town/City		Postcode
Please pa	y Connect Foundation (North Lincs)	
Sort code:	0 8 - 9 2 - 9 9	Account number: 6 7 2 5 0 4 9 5
The sum of:	(in figures)	(in words)
Town/City Please pa Sort code: The sum of: On the: Until furth	D D / M M / Y	Y Y Each: Week Month Year
Until furth	er notice and debit my account according	ıly.
Name of a	ccount to be debited:	
Sort code:		Account number:
Signature	(s)	Date
		//
Title	First name	Last name
Home addre	is	
Home address Town/city		Postcode
Email addres	s	
We would be	nue to koon you un to data with informa	ation about Countborns Foodbank, Diagontisk your professors
	and Post Email Post	ation about Scunthorpe Foodbank. Please tick your preference: I do not wish to receive future communications from Scunthorpe Foodbank
You can char	ge your preferences any time by contacting	g us on 0300 102 8061 or emailing us at info@scunthorpe.foodbank.org.uk
•	oodbank, is committed to protecting yo	our privacy and will process your personal data in accordance with current Data Prote al donors is available from the foodbank on request.
gifta	I want to Gift Aid my	donation by 25p of Gift Aid for every £1 you donate. donation and any donations I make in the future or have made in the past four years. Ind understand that if I pay less Income Tax and/or Capital Gains Tax than the Laimed on all my donations in that tax year it is my responsibility to pay any difference.