



ACTION ON POVERTY

Charity No. 290836

I would like to make a **regular** gift of

Starting from
(Please allow 30 days between sending this form and the date of the first payment.)

Monthly Quarterly Annually

INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY

Name of Account Holder(s):

Account No.

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Branch Sort Code:

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Name and full postal address of your Bank or Building Society Branch:

The Manager,
.....Postcode

Please make Standing Order payments for the credit of
APT Action on Poverty,
at CAF BANK Ltd, PO Box 289, West Malling, Kent ME19 4TA
Sort Code: 40-52-40 Account No. 00005886

Name:

Address:

..... Postcode:

Signature Date

GIFT AID DECLARATION I would like APT to reclaim the tax.

Please tick this box if you are a UK tax payer and pay income tax or capital gains tax equal to the amount of tax reclaimed .

Please return this form to APT Action on Poverty at Nicholas House,
Heath Park, Main Road, Cropthorne, Worcs. WR10 3NE