

SAMS RIDE 2018



CHARITY CYCLE SPORTIVE FOR THE SALISBURY AND DISTRICT SAMARITANS SUNDAY MAY 20th 2018

SPONSORSHIP AND GIFT AID DECLARATION FORM

Name of Rider	
Target distance	

Sponsors declaration:

If I have ticked (✓) the box headed 'GIFT AID', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Samaritans of Salisbury and District to reclaim tax on the donation detailed below, given on the date shown. I understand that if I pay less Income Tax / or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand the charity will reclaim 25p of tax on every £1 that I have given.

Remember: You must provide your full name, home address, postcode & \(\sim \) the Gift Aid for the charity to claim tax back on your donation. Cheque payments should be made to 'The Salisbury and District Samaritans'

Sponsors name	Contact details including name, home address and postcode	Total pledged	Date Paid	GIFT AID ✓

Sponsors name	Contact details including name, home address and postcode	Total pledged	Date Paid	GIFT AID ✓
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	Total donations received			

Total donations received	
Total Gift Aid donations (25% of those ✓ Gift Aid)	
Date donations given to Charity	