

# SINGLE DONATION FORM

I would like to make a donation to Essex Blind Charity.

*Please complete your details:*

Name .....

Address .....

Postcode: ..... Telephone .....

I enclose a cheque for/have paid the directly to your bank account (please delete as appropriate) the sum of

£ .....

Our bank account details are:

Essex Blind Charity  
National Westminster Bank  
4-5 High Street  
Chelmsford  
Essex  
CM1 1FZ

Sort Code: 60-05-13 Account No. 17565448

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## Gift Aid Declaration

**Taxpayers please sign here to make your gift worth almost a third extra.**

I declare all donations I make on or after this date to be Gift Aid Donations. I confirm that I am a UK taxpayer and the amount of tax I pay exceeds that amount I would like Essex Blind Charity to claim.

Signature ..... Date: .....

Name: ..... Address: .....

..... Postcode: .....

**Please complete and return this form to:**

**Essex Blind Charity, Read House, 23 The Esplanade, Frinton-on-Sea, Essex. CO13 9AU**

## THANK YOU!