

Hughes Syndrome Foundation

DONATION FORM

You too can help to advance public and medical understanding of Hughes Syndrome (antiphospholipid syndrome) and to fund further research into the causes, effects and treatment.

Gift Aid Declaration

| | | | | | |
|---------|--|----------|--|-----------|--|
| Title | | Forename | | Surname | |
| Address | | | | | |
| | | | | | |
| | | | | Post Code | |

I want the Hughes Syndrome Foundation to treat

*the enclosed donation of £.....

*the donation(s) of £..... which I made on ... /... / ...

*all donations I make from the date of this declaration until I notify you otherwise

*all donations I have made since 6 April 2000, and all donations I make from the date of this declaration until I notify you otherwise

as Gift Aid donations. Signed Date

NOTES

1. You must pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity reclaims on you donations in the tax year (currently 25p for each £1 you give).
2. You can cancel this declaration at any time by notifying the charity.
3. If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that the charity reclaims, you can cancel your declaration (see note 1).
4. If you pay tax at the higher rate you can claim further tax relief in you Self Assessment tax return.
5. If you are unsure whether your donations qualify for Gift Aid tax relief please ask the charity. Or ask your local tax office for leaflet IR 65.
6. Please notify the charity if you change your name or address.

*delete as necessary