



Name of your bank

Branch address

Standing Order Mandate

Pontypridd.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.

Town/City		Postcode
Please pay	Pontypridd Foodbank,	
Town/City Please pay Sort code: The sum of: On the: Until further	2 0 - 6 8 - 7	6 Account number: 5 0 3 6 2 9 9 9
The sum of:	(in figures)	(in words)
On the:	D D / M M /	Y Y Each: Week Month Year
Until furthe	er notice and debit my account accord	dingly.
Name of ac	count to be debited:	
Sort code:		Account number:
Signature	(s)	Date//
Title	First name	Last name
Home addres	s	
Town/city		Postcode
Email address	•	
We would le	ua ta kaan yay yn ta data with inf	ormation about Pontypridd Foodbank. Please tick your preference:
we would lo		I do not wish to receive future communications from Pontypridd Foodbank
Email a	Lindik Lindik Lindik	
Email a	to your proforances any time by contact	cting us on 01/1/2 /0/602 or omailing us at into@nontypridd toodhank org uk
	ge your preferences any time by contac	cting us on 01443 404692 or emailing us at info@pontypridd.foodbank.org.uk

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsiblity to pay any difference.