Children with Cystic Fibrosis Dream Holidays

PO BOX 10443, HINCKLEY, LE10 9FP

STANDING ORDER MANDATE

Name	Address			F	Postcode
Many people ch	oose this as their preferred method of If you would like to make a regular donati		-	_	
	Name of beneficiary: Children with Cystic Fibrosis Dream Holidays	Beneficiary's bank:	Account number: 01554336	Sort Code: 40-20-24	Branch: Epsom
Name of your bank		Your bank's full address & post code			
Your Account No	Sort Code		mount £	In Words.	
eate of first payment	t / / and thereafter ever	у	until further notice		
Account holders na	me		Signature		Date / /
•	o accept instructions to change Standing Orders working days or more to reach our account. Your ba		ther than Current Accounts.		
giftaid it	I wish my donation to be Gift Aided. Your name and address is needed if you tick this I am a UK taxpayer. I want Dream Holidays to	box.	nature ne on or after 6th April 2000 as	Gift Aid donations u	ntil I notify Dream Holidays other
<i>,</i> ,		UK Income or Capital Gains tax must be at	east equal the amount Dream Holidays will	claim in the tax year I do	not qualify for Gift Aid.

reg: 1036069