



"Caring for people with lupus"

DONATION FORM

Title: Mr. Ms. Mrs.....First Name

Surname.....

Address.....

.....

Postcode:Telephone No.

Amount of donation £.....

GIFT AID DECLARATION

I wish LUPUS UK to treat any donations made by myself as Gift Aid Donations.

Signature.....

Date.....

I confirm I pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity reclaims on my donations in the tax year (25p per £1)

If you wish to make a regular standing order payment please telephone this office for an instruction form.

Please complete the relevant sections of this form and send to:

LUPUS UK, St. James House, Eastern Road, Romford, Essex RM1 3NH

LUPUS UK Visit our website: www.lupusuk.org.uk
Reg Charity Nos. 1051610, SC039682

National Office:
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