

STANDING ORDER MANDATE

To Bank

Address

.....

| | | | |
|--------------------------|---|-----------------------------------|--|
| | Bank | Branch Title (not address) | Sorting Code Number |
| Please Pay | The Royal Bank of Scotland plc | Edinburgh West End Office | 83 51 00 |
| | Beneficiary's Name | | Account Number |
| for the credit of | Lothian NHS Endowments | | 0 0 6 6 4 2 1 8 |
| | Amount in Figures | Amount in Words | |
| the sum of | | | |
| | Date and Amount of first payment | | Due Date and Frequency |
| Commencing | | | |
| | *now | | and thereafter every |
| | Date and Amount of last payment | | |
| *Until | | | *Until you receive further notice from me/us in writing |
| quoting the reference | S07427 Friends Eyecare Fund | | |

and debit my/our account accordingly

This instruction cancels any previous order in favour of the beneficiary named above under this reference

| |
|-----------------------|
| Special Instructions: |
| |

| |
|---------------------------|
| Account be debited |
| |

| |
|-----------------------|
| Account Number |
| |

Signature(s)

Date

- Note: The Bank will not undertake to:
- (i) make any reference to Value Added Tax or other indeterminate element
 - (ii) advise payer's address to beneficiary
 - (iii) advise beneficiary of inability to pay
 - (iv) request beneficiary's banker to advise beneficiary of receipt

* Delete if not applicable

To: Edinburgh and Lothians Health Foundation
2nd Floor, Waverleygate
2-4 Waterloo Place
Edinburgh
EH1 3EG

GIFT AID DECLARATION
LOTHIAN HEALTH BOARD ENDOWMENTS FUND

I wish this donation and unless I inform you otherwise, any further donations I may make, to be deemed Gift Aid Scheme donations and for the charity to reclaim tax on them.

Signed..... Date.....

Tax Requirement

The donor must pay an amount of income tax or capital gains tax equal to the tax we reclaim on your donations. Remember to notify us if you no longer pay an amount of income tax or capital gains tax equal to the tax we reclaim on your donations.

We can reclaim 25p of tax on every £1 you give. If you pay income tax at the higher rate, you must include all your Gift Aid donations on your Self Assessment tax return if you want to receive the additional tax relief due to you.

Notes:

Please notify this office if you:

1. Want to cancel this declaration
2. Change your name or home address