

Gift Form

OFFICE USE ONLY
Reference Number:

Please complete the relevant sections and return the whole form to:

Emma Deabill, 9th Floor, Mercantile House, Hampshire Terrace, Portsmouth PO1 2EG Alternatively you can make a secure donation online at www.port.ac.uk/supportus

Thank you for your support

Personal Details

Name: _____

Address: _____

Post Code: _____

Email: _____ Telephone: _____

I would like information about leaving a gift in my will I would like my gift to remain anonymous

Where would you like your gift to go?

The Futures Fund Brain Tumor Research Other _____ The area of most need

Gift Aid Declaration

If you are a UK tax payer Gift Aid allows the University of Portsmouth to reclaim the basic rate of tax paid on your gift, increasing its value by 25p per £1 at no cost to you. If you are a higher rate tax-payer, you can claim the tax relief on your self-assessment tax return.

I would like the University of Portsmouth to treat this donation, and all future donations I make from the date of this declaration, as Gift Aid donations.

I confirm that I am a UK tax payer and pay Income Tax and/or Capital Gains Tax at least equal to the tax that the charity will reclaim on my donations in the appropriate tax year (currently 25p for each £1 given). I understand that I can cancel this declaration at any time by contacting the Alumni Relations and Development Office.

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Signed: _____

Date: DD / MM / YY

Gift Details

I would like to make a gift to the University of Portsmouth of: £ _____

I wish to make a gift by cheque or CAF voucher made payable to: University of Portsmouth

I wish to make a gift by debit or credit card. Please charge my Visa MasterCard Maestro

Cardholders name as it appears on card: _____

Card No. Start date MM / YY Expiry date MM / YY

Security No. Issue No. Signature: _____
(Last 3 digits on signature strip) (If applicable)

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Cost Centre: _____ Nominal Code: 6302A