

CARDIFF & VALE HEALTH CHARITY

Donation Receipt Form

Name of Donor (please print) _____

Address of Donor (please print) _____

Post code _____

Telephone _____ Email address _____

Future contact:

Your support helps fund new healthcare projects, over and above NHS funding. We'd love to tell you our news, activities and appeals and how your money will be spent to benefit our patients. We take your confidentiality and data protection extremely seriously, as befits an NHS charity. We store contact details carefully, and we do not share them with anyone. We don't do 'pressurised' fundraising – that's not in our DNA – and you are free to change your mind and stop hearing from us at any time. Please tell us if you would be happy for us to contact you:

By email By post

I wish to donate £ _____ to Cardiff and Vale Health Charity.

Donor Signature _____

If this donation is made in memory please state the person's name _____

Name of service/ward/hospital benefitting from donation: _____

giftaid it **Increase your donation by 25% (at no cost to yourself)**

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 any donations I make today, in the future and in the past 4 years it is my responsibility to pay any difference.

Signed: _____ Date: _____

For UHB use: Fund number Donation Payment Legacy *please tick*

Donation received by _____ Date _____

Donation paid in by _____ Date _____

THANK YOU FOR YOUR SUPPORT

Cardiff & Vale Health Charity is registered charity number 1056544. Contact us on fundraising.cav@wales.nhs.uk or 029 2183 6042. Cardiff & Vale Health Charity Fundraising Office, Woodland House, Maes-y-Coed Road, Cardiff, CF14 4HH

White copy to donors; blue and pink copied to Cashiers' Office; keep yellow copy in department.