

CONTRIBUTION BREAKDOWN FORM

FOR OFFICE USE ONLY

Tel: 028 3026 2586

Cathedral Presbytery
38 Hill Street
NEWRY
BT34 1AT

NAME _____

ADDRESS _____

REFERENCE/ ENVELOPE NO _____

I / We wish to make our contributions by Standing Order and to allocate the money as indicated in the table below.

SUNDAY (OFFERTORY) COLLECTIONS (WEEKLY x 52)	
PRIESTS' COLLECTION (MONTHLY x 12)	
EASTER COLLECTION	
EDUCATION OF PRIESTS	
POPE'S COLLECTION	
YOUTH MINISTRY	
FAMILY CARE SERVICES	
PROPAGATION OF THE FAITH	
CHRISTMAS COLLECTION	
SICK AND RETIRED PRIESTS	
CEMETARY COLLECTION	
TOTAL	

I / We will pay the TOTAL AMOUNT is twelve monthly instalments of £ _____

Signature (s) _____

Date _____

Please complete BOTH the Standing Order Form and Contribution Breakdown Form and return to the Parish Office. The Parish Office will forward the Standing Order Form to your bank/building society and we will hold the Contribution Breakdown Form for our records.

STANDING ORDER FORM

FOR BANK USE ONLY

Tel: 028 302 62586

Cathedral Presbytery
38 Hill Street
NEWRY
BT34 1AT

NAME _____

ADDRESS _____

REFERENCE _____

TO THE MANAGER
NAME & ADDRESS OF BUILDING SOCIETY

A/C NO:									
---------	--	--	--	--	--	--	--	--	--

SORT CODE			—			—		
-----------	--	--	---	--	--	---	--	--

I/We hereby authorise you to debit my/our account monthly with the sum of £ _____ until further notice from me/us in writing.

And to credit NEWRY PARISH, DIOCESE OF DROMORE

A/C: 17071627

SORT CODE: 93-83-78

First Trust Bank, Hill Street, NEWRY, Co. Down. BT34 1AU

START DATE: _____

Signature (s) _____

Date _____

Please complete **BOTH** the Standing Order Form and Contribution Breakdown Form and return to the Parish Office. The Parish Office will forward the Standing Order Form to your bank/building society and we will hold the Contribution Breakdown Form for our records.

Dromore Diocesan Trust
(Charity No. XT27177)



giftaid it

St. Patrick and St. Colmans (Newry) Parish Trust
Ref: XN48113

Gift Aid declaration for past, present & future donations

Please treat as Gift Aid donations all qualifying gifts of money made:

Today In the past 4 years In the future

Please tick all boxes you wish to apply

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify.

I understand the charity will reclaim 25p of tax on every £1 that I give on or after 6 April 2016.

Donor's details

Title ----- First name or initial(s)-----Envelope No-----

Surname-----

Full home address-----

Postcode -----

Date ----- Signature-----

Please notify the charity or CASC if you:

- * *Want to cancel this declaration*
- * *Change your name or home address*
- * *No longer pay sufficient tax on your income and/or capital gains.*

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.