




FULL NAME (FIRST NAME AND SURNAME)	HOME ADDRESS NOT WORK (THIS IS ESSENTIAL FOR GIFT AID)	POST CODE	AMOUNT £	DATE PAID	GIFT AID (✓)
<b>BROUGHT FORWARD: £</b>					
<b>REMEMBER: FULL NAME + HOME ADDRESS + ✓ = GIFT AID IT</b>			<b>TOTAL DONATION RECEIVED £</b>		<b>TOTAL GIFT AID £</b>

**PLEASE REMEMBER THAT ALL MONEY MUST BE COLLECTED AND SENT TO THE ROTARY CLUB OF ILFRACOMBE, TOGETHER WITH THIS FORM. Cheques should be payable to The Rotary Club of Ilfracombe Trust Fund.**

**Proceeds will be donated to Children’s Hospice South West, Hospice Care Trust (North Devon) and other Rotary charities.**

The Rotary Club of Ilfracombe Trust Fund is a Registered Charity – 1037348  
c/o Thomas Westcott,  
Chartered Accountants  
96 High Street, Ilfracombe  
EX34 9NH



**CERTIFIED THAT ..... COMPLETED .....MILES  
NOT VALID UNLESS STAMPED**

**ALL SPONSORSHIP  
TO BE RECEIVED BY  
8<sup>TH</sup> MAY 2018**