

THAMIZHAR MUNNETRA KAZHAGAM - LONDON

தம்ழர் முன்னேற்றக் கழகம் - இலண்டன்

THIRUVALLUVAR TAMIL SCHOOL திருவள்ளுவர் தமிழ்ப் பள்ளி

NEWHAM T.M.K. YOUTH COUNCIL நியூகாம் த.மு.க. இளைஞர் மன்றம்

BANKERS ORDER FORM

To: The Bank Manage	r				
Bank Name:					
Branch/Address:					
Account Details:					
Sort Code:		Account Number:			
Please pay from the my/our above account to Lloyds Bank Ltd., at No.14, High Street North, East Ham, London, E6 2HN, for the account of: T.M.K. THIRUVALLUVAR TAMIL SCHOOL, Sort Code: 30-92-93, Account No: 00332778 the sum of pounds:					
□ £5	☐ £10 ☐ £15	☐ £20 ☐ £25	Other		
(This order cancels any previous standing order to TMK Thiruvalluvar Tamil School)					
Amount in words:					
PAYMENT Start Date:	DD / MM / YYYY a	nd therafter			
Frequency:	☐ Monthly ☐	Quarterly Half Yea	arly 🗌 Yearly		
Donation For:	☐ Pongal ☐] School			
My/Our Details and Address:					
	First Name		Surname		
1					
2					
Address		·			
		Postcode			
Signature(s):		Date:			

TMK House – 46A East Avenue, Manor Park, London E12 6SQ – UK Mobile: 07459 528739, 07931 463952, 07738 529167

Email: tmktamilschool@gmail.com Web: www.tmklondon.com





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தம்ழர் முன்னேற்றக் கழகம் - இலண்டன் THIRUVALLUVAR TAMIL SCHOOL திருவள்ளுவர் தமிழ்ப் பள்ளி

NEWHAM T.M.K. YOUTH COUNCIL நீயூகாம் த.மு.க. இளைஞர் மன்றம்

DONATION/GIFT AID FORM

	Reference Number:				
My Details :					
First Name					
Surname					
Address					
		Postcode			
Mobile					
Email					
I declare all gifts of money that I've made in the past 6 years and all future gifts of money that I make from the date of this declaration are Gift Aid donations.` Make your donation worth almost a third more at no extra cost to you.If you are a taxpayer, you can make your donation worth more with Gift Aid. For every pound you give to us, the charity get an extra 28p from the Inland Revenue. All you need to do is check the statement above and tick the box. To qualify for Gift Aid, what you pay in income tax or capital gains tax must at least equal the amount we will claim in the tax yearPlease notify us if you want to cancel this declaration, change your name or home address or no longer pay sufficient tax on your income and/or capital gains.					
Signature:		Date:			
s	ignature of the President	Signature	e of the Secretary		

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