

WHISTON OND ST HELENS HOSPITALS' CHARITY

Thank you for being so lovely :-)

TITLE	FIRST NAME	SURNAME
ADDRESS		
		POSTCODE
TELEPHONE	MOBILE	EMAIL
SIGNATURE		DONATION ENCLOSED £
communicatio	ns by post, email and/or SMS St H	uld prefer not to receive information about services and developments at lelens and Knowsley Teaching Hospitals NHS Trust, which may benefit our charity with your help

BRIGHTENING THE LIVES OF ALL OUR PATIENTS

Remember... please don't send cash in the post!

Please return to the cash office at either Whiston Hospital or St Helens Hospital

Cheques payable to St Helens and Knowsley Teaching Hospitals NHS Trust

Gift Aid your donations
By ticking this box I wish Whiston and St Helens Hospitals' Charity, the charity of St Helens and Knowsley Teaching Hospitals NHS Trust, to treat this donation as a Gift Aided donation. I confirm that I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for this tax year (6 Apr to 5 Apr) that is at least equal to the amount of tax that all charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for this tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p on every £1 that I give. Do not tick the box if you do not pay tax.
Your donation will be automatically placed into a general fund and will be allocated to where it is most needed to help patients. If you would like to express a wish as to where your donation will be allocated please indicate this here. Thank you.
Ward/department name

Registered charity in England and Wales: 1053125