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| **Request to join the Centralised Tax Recovery Scheme** |  |

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| **Parochial Church Council of..........................................................................................**We request that tax reclaimable under Gift Aid declarations and/or Covenants in our favour is recovered on our behalf by the Portsmouth Diocesan Board of Finance.We confirm that our gift aid claims will/will not include claims under the Gift Aid Small Donations Scheme. (Delete as applicable)Signed on behalf of the PCC (Date) …………………………………………………..  |
| **Name** | **Role (e.g. Treasurer)** | **Signature** |
|  |  |  |
| 1. |  |  |
|  |  |  |
| 2. |  |  |
|  |  |  |
| **Parish Contact Details:** |  |  |
|  |  |  |
| Name |  |
|  |  |  |
| Role |  |  |
|  |  |  |  |
| Address |  | Telephone Number |  |
|  |  |
| e-mail |  |
|  |  |
|  |
| In case of need to raise queries, available normally during the day/evenings only? (delete as applicable) |
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| Tax Reference |  | Date up to which last claim made |  |
|  |  |  |  |
| The Diocese will pass tax refunds direct to your parish’s bank account. Please provide details below: |
|  |  |  |  |
| Name of Bank |  | Sort Code |  |
|  |  |  |  |
| Name on Account |  | Account Number |  |
|  |  |  |  |
| Please ensure that this information is correct to avoid delays in credits. |