



DONATION FORM

I (name) _____

of (address) _____

_____ Postcode: _____

Wish to donate the sum of: £ _____

to benefit* _____

*Please note that 'the difference' can accept donations only for purposes relating to NHS Borders Health Services. To ensure that your donation benefits your chosen service please specify this above, eg Ward 16, Special Care Baby Unit, Hawick Community Hospital etc.
Donations to external charities should be sent direct to your charity of choice.



Make your donation go further

If you are a UK tax payer your donation is eligible for giftaid.

For each pound you donate the tax office will give an additional 25p at **no extra cost to you.**

All you have to do is **tick the box below.**

I am a UK tax payer and would like 'the difference' to treat this and any donations I make in the future as Gift Aid donations, until I notify you otherwise **

please tick this box

** I understand that I must have paid sufficient income tax or capital gains tax during the relevant tax year to cover the amount reclaimed on my donation.

THANK YOU FOR YOUR DONATION

From time to time 'the difference' may wish to contact you with news of how your donation has been used or to inform you of forthcoming fundraising events. Please note that your details will not be sent to any other organisations. Please tick this box if you **do not** wish to be contacted.