



SACRED FLAME MINISTRIES

REGISTERED CHARITY NO. 1119192

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GIFT AID DECLARATION FORM

NAME.....ADDRESS.....

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Email.....@.....

I would like the tax to be reclaimed on any eligible donations that I have ever made or will make to SFM Ministries until I notify you otherwise. I confirm that I pay an amount of UK income or capital gains tax equal to the tax that SFM Ministries will reclaim:

Signed..... Date.....