

**PETE & LIBBY (WITH FINLAY, GABRIEL AND FLORENCE IMANI)**
*St Leonard's Church, Exeter • [plhalestrap@aimint.org](mailto:plhalestrap@aimint.org)*

The Halestraps are serving at Kijabe Hospital, Kenya. Pete oversees the care of the outpatient & emergency departments as well developing training programmes.

If you would like to partner with **Halestraps** in your prayers, gifts and practical support, please complete this form and return to **Freepost RTJH-JRZE-XXXX Africa Inland Mission Halifax Place, Nottingham NG1 1QN.**


**I WOULD LIKE TO GIVE  
A ONE OFF GIFT OF...**
**PLEASE SEND ME THEIR  
PRAYER LETTERS...**

£:

☐

by post

☐

by email

*Please make cheques payable to AIM International*

Your Name:

Address:

Postcode:

Tel:

Email:

☐ We'd love to keep you posted about AIM's work.

Tick the box if you **don't** want to be kept up to date.

☐ I want AIM to treat all gifts from...

Date:

 as Gift  
Aided

until I notify you otherwise.

☐ I am not a taxpayer

**I understand that:** I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference. AIM will reclaim 25p for every £1 that I donate

**Please notify AIM 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

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

For any queries, email: [financeadmin.eu@aimint.org](mailto:financeadmin.eu@aimint.org)

**I WOULD LIKE TO GIVE REGULARLY VIA STANDING ORDER WITH...**

£:

in words:

☐ a month

☐ a quarter

☐ a year

Payable to **AIM International**, Santander Code  
**09-07-20**, Account **05566355**, starting on the...

Date:

 until further  
notice or until...

Date:

*or on receipt if later*

Your Name:

*block capitals*

Signed:

Date:

**Your Bank Details** | Please return this form to AIM, who will forward it to your bank.

Name:

Bank Plc

Sort code:

|

|

Address:

Account Number:

Postcode:

Bank quoting ref:

*office/bank use only*