

# Every Penny Helps: **Employer's Pack**

You could make a  
world of difference





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## Donating Pence From Net Pay

Have you ever thought that even the pennies on a payslip could be used for charitable giving? Well, they can – through **Every Penny Helps**

- **Every Penny Helps** is a scheme, complimentary to Payroll Giving, to enhance your contributions to charity. Administered by Charitable Giving, the scheme enables employees to donate the pence from their net pay with enhancement through Gift Aid to any charity nominated by their employer
- Currently, if 60p, say, is deducted from a net pay of £878.60, the employee would retain £878.00 and 75p would be available for donation to charity with the Gift Aid enhancement
- Just think how effective such a scheme could be. It will appeal to many employees and the results are so rewarding – with an average monthly donation of 50p per employee, as few as 100 subscribers could raise over £750 per annum with Gift Aid enhancement

### What are the benefits?

- Deductions are enhanced by Gift Aid and can be matched if desired – an excellent way to provide extra funds for one's Charity of the Year, for example
- Appeals to a wide cross section of staff and high levels of participation can be achieved
- Freedom to nominate any charity for donations and to distribute donations whenever desired
- Manage your scheme on-line at [www.charitablegiving.co.uk](http://www.charitablegiving.co.uk) to obtain statements and provide instructions to distribute funds by e-Voucher
- The scheme is simple in concept and simple to operate: you deduct the pence – Charitable Giving will do the rest!

### How does the scheme work?

- The first step is to deduct the pence from each subscribing employee's net pay
- After each payroll run, a list of donors should be sent to us with their deductions which will be credited to a Corporate Options Account where they will remain until we are instructed to distribute them to charity
- We will reclaim the Gift Aid and credit it to your Corporate Options Account
- The management charge is 4% of the total deductions received; this can either be paid by the company or taken out of the deductions received

### What do you have to do to subscribe?

- Download the **Every Penny Helps: Employer's Pack** from [www.charitablegiving.co.uk](http://www.charitablegiving.co.uk)
- Complete the **Contract & Corporate Options Account Application**
- Get subscribing employees to either add their names to a **Group Gift Aid Declaration** or individually complete an **Individual Gift Aid Declaration** (this can also be used for subsequent additional subscribers)
- Send **all** the completed forms to Charitable Giving either by email to [forms@charitablegiving.co.uk](mailto:forms@charitablegiving.co.uk) or by post

**If you have any questions, please contact us on 01822 611180 or via [mail@charitablegiving.co.uk](mailto:mail@charitablegiving.co.uk)**





# Every Penny Helps

## CONTRACT

- This contract is between Charitable Giving (the "Agency") and
 

Company Name:		(the "Agent")
Company Address:		
	Post Code:	
- It is agreed that the **Agent** will operate the **Every Penny Helps** scheme (the "Scheme") from \_\_\_/\_\_\_/\_\_\_ and
  - Deduct and hold the pence withheld from the employees' net pay pursuant to the rules of the Scheme on the Agency's behalf
  - Pay over to the Agency sums withheld from employees pursuant to the Scheme within 14 days of the end of the Income Tax month to the Charitable Giving – Collect bank account (detailed below) accompanied by a list of contributing employees and their deductions
  - Obtain from subscribing employees' authorities and instructions for the deductions via the Gift Aid Declaration overleaf
- It is agreed that the **Agency** will:
  - Provide such information, documentation, and instructions in order that the **Agent** may comply with their responsibilities under the **Scheme**
  - On behalf of the **Agent**, open and hold all monies in a designated **Corporate Options Account** (application to be completed below) and maintain a record of debits and credits to such
  - Make an administration charge of 4% of all monies contributed by employees before distribution to charities, to be:
 

<input type="checkbox"/> Deducted out of employees' contributions	<input type="checkbox"/> Paid by the employer	(please tick <b>one</b> option)
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  - Reclaim the Gift Aid on employees' contributions and credit such to the designated Corporate Options Account for the **Agent**
  - Provide a Statement of all debits and credits to the designated Corporate Options Account for the **Agent**, either physically or electronically
  - Distribute funds **annually** to the nominated charity or charities for which a charge of £2.50 will be made
- This Contract may be terminated by either party by giving three months' notice delivered to the registered office of the company or last recorded address of the **Agent** but not withstanding the aforementioned notice the **Agency** may give one month's notice to terminate the Contract in the event of significant failure by the **Agent** to give effect to the scheme

## CORPORATE OPTIONS ACCOUNT APPLICATION

**NAME:** The account is to be known in the name of:

**TRANSACTIONS:** Deposits to this account, i.e. credits, by cheque or electronic transfer, e.g. BACS, will be made to:

**Bank details will be supplied on receipt of completed application form**

**MANAGERS:** The account will be managed by either or both of the following persons:

1.	Title: <input style="width: 40px;" type="text"/>	First Name: <input style="width: 150px;" type="text"/>	Surname: <input style="width: 150px;" type="text"/>
	Tel: <input style="width: 150px;" type="text"/>	Email: <input style="width: 150px;" type="text"/>	Password: <input style="width: 80px;" type="text"/>
2.	Title: <input style="width: 40px;" type="text"/>	First Name: <input style="width: 150px;" type="text"/>	Surname: <input style="width: 150px;" type="text"/>
	Tel: <input style="width: 150px;" type="text"/>	Email: <input style="width: 150px;" type="text"/>	Password: <input style="width: 80px;" type="text"/>

The provision of email addresses and passwords will ensure registration for online access, so that the Corporate Options Account can be managed via [www.charitablegiving.co.uk](http://www.charitablegiving.co.uk). Each password must be at least 8 characters long (alphabetic only) and contain at least one number.

<p style="text-align: center;"><b>Signed on behalf of Charitable Giving</b></p> <p><b>Signature:</b> <input style="width: 280px; height: 30px;" type="text"/></p> <p><b>Position:</b> <input style="width: 280px; height: 30px;" type="text"/></p> <p><b>Date:</b> <input style="width: 280px; height: 30px;" type="text"/></p>	<p style="text-align: center;"><b>Signed on behalf of the company</b></p> <p><b>Signature:</b> <input style="width: 280px; height: 30px;" type="text"/></p> <p><b>Print Name and Position:</b> <input style="width: 280px; height: 30px;" type="text"/></p> <p><b>Date:</b> <input style="width: 280px; height: 30px;" type="text"/></p>
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On completion, please return to: **Charitable Giving, Union Mine Road, Pitts Cleave, Tavistock, Devon, PL19 0NS**







## Every Penny Helps: Individual Gift Aid Declaration

I, the undersigned, hereby instruct my employer (the “**Agent**”), to deduct the pence from my net pay and to pay it to Charitable Giving (the “**Agency**”) who in their capacity as a charity will act on my behalf to recover through Gift Aid the Income Tax paid on such present and future donations and to credit it, with my donations, to a designated Corporate Options Account for the **Every Penny Helps** scheme held by the **Agency** on behalf of the **Agent** and to distribute the funds held therein periodically to charities nominated and as instructed by the **Agent**, confirm that, during each tax year (6 April to 5 April), will have paid an amount of Income Tax and/or Capital Gains Tax at least equal to the tax the **Agency**, all charities, and Community Amateur Sports Clubs will reclaim on my donations for that tax year, and understand that this instruction may be cancelled at any time by informing the **Agent’s** payroll office.

Initials*:	<input type="text"/>	Forenames:	<input type="text"/>	Last Name*:	<input type="text"/>
Employer*:	<input type="text"/>			Payroll/Staff No:	<input type="text"/>
House Name/Number*:	<input type="text"/>				
Address:	<input type="text"/>				
Post Code*:	<input type="text"/>				

**PLEASE NOTE:**

All fields marked as required by an “\*” must be completed and with the appropriate information, e.g. **Initials** with initials, **Post Code** with post code. Failure to do so will render an individual’s Declaration invalid and Gift Aid will not be claimed.

Signature:

Date\*:

On completion, please return to: **Charitable Giving, Union Mine Road, Pitts Cleave, Tavistock, PL19 0NS**

