



Cheng Hong Welfare Service Society
众弘福利协会

Donation/GIRO Application Form
捐款/财路捐款申请表格

Donor's Particulars 捐款者资料

Please Tick 请打勾:

<input type="checkbox"/>	Individual 个人
<input type="checkbox"/>	Corporate/Organisation 公司/机构

Name 姓名:	
Salutation 名称:	
NRIC/FIN/UEN 身份证/公司, 机构注册号码:	
Address 地址:	
Postal Code 邮区:	
Contact Number 联络号码:	
Email Address 电邮地址:	

Service/s Supported 赞助服务

Please Tick 请打勾:

<input type="checkbox"/>	TCM Service 中医服务
<input type="checkbox"/>	Afterlife Memorial Service 后事服务
<input type="checkbox"/>	Others 其他 Please state 请列明:

Please mail the completed form to 请将完成表格邮寄至:
Blk 12 Eunos Crescent #01-2767 Singapore 400012

Yes, I would like to support the beneficiaries with a
ONE-TIME / MONTHLY gift of:
是的, 本人/机构愿意以 一次性 / 按月
的方式, 支持贵慈善机构的受益者:

Please Tick 请打勾:

<input type="checkbox"/>	\$300	<input type="checkbox"/>	\$50
<input type="checkbox"/>	\$200	<input type="checkbox"/>	Others 其他数额 Please State 请列明
<input type="checkbox"/>	\$100	<input type="checkbox"/>	

<input type="checkbox"/>	I have enclosed a cheque, made payable to "Cheng Hong Welfare Service Society" 本人/机构附上划线支票/汇票, 支付给 "Cheng Hong Welfare Service Society"
--------------------------	--

Bank/Cheque No. 银行/支票, 汇票号码:

or,

<input type="checkbox"/>	I have filled up the GIRO form as per attached below. 本人/机构已填写了以下的财路申请表格。
--------------------------	--

APPLICATION FORM FOR INTERBANK GIRO
财路申请表格

Name of Bank 所属银行:	
Branch 分行:	
Name per Bank Records 户口持有人姓名	
Bank Account No. 户口号码:	
Donor's NRIC/Passport No. 户口持有人身份证/护照号码:	
Name of Billing Organisation 支付机构:	CHENG HONG WELFARE SERVICE SOCIETY

- A. We hereby instruct you to process Cheng Hong Welfare Service Society's instructions to debit my/our account.
B. You are entitled to reject Cheng Hong Welfare Service Society's debit instructions if my/our account does not have sufficient funds

- C. This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you, or upon receipt of my/our written revocation through Cheng Hong Welfare Service Society.

Signature(s)/Thumbprint(s) per Bank's Record 户口签名/拇指印:

For CHWSS Official Use

Bank

7	1	7	1
---	---	---	---

Branch

0	2	7
---	---	---

CHWSS Bank Account Number

0	2	7	9	0	7	7	2	0	4
---	---	---	---	---	---	---	---	---	---

CHWSS Donor's Reference No.

--	--	--	--	--	--

Limit of Each Payment (excludes cents)

--	--	--	--	--	--

For Bank's Official Use Only:

To: Cheng Hong Welfare Service Society

This application is hereby rejected for the following reason(s)

<input type="checkbox"/>	Signature/Thumbprint differs from Bank Records
<input type="checkbox"/>	Signature/Thumbprint incomplete/unclear
<input type="checkbox"/>	Account operated by signature/thumbprint
<input type="checkbox"/>	Wrong Account Number
<input type="checkbox"/>	Amendments not countersigned by donor
<input type="checkbox"/>	Others:

Name of Bank Officer: _____

Authorised Signature: _____

Date: _____