

### My Personal Particulars (个人资料)

 Personal Donation 个人捐赠

 Corporate Donation 公司捐赠

Name (Dr / Mr / Mrs / Ms / Mdm) 姓名/公司名称: \_\_\_\_\_

 Full NRIC/FIN 身份证号码:  -  - 

Company Unique Entity Number (UEN) 公司注册号码:

(Only applicable for Corporate Donation)

Address 地址: \_\_\_\_\_

\_\_\_\_\_

Postal Code 邮区: \_\_\_\_\_

Contact Number 联络号码: \_\_\_\_\_ (H) 住家 \_\_\_\_\_ (M) 手机 \_\_\_\_\_ (O) 办公事

Email 电子: \_\_\_\_\_

### Monthly Donation (按月捐款)

**Amount:**       \$100       \$80       \$50       \$30       Other Amount: \$ \_\_\_\_\_

### Application Form for Interbank GIRO (财路申请表格)

**Part 1: For your completion (Please do not use correction fluid 请不要使用涂改液)**

 Name as in Bank's record 姓名如同银行记录: \_\_\_\_\_  
 (Dr / Mr / Mrs / Ms / Mdm)

 Full NRIC/FIN 身份证号码:  -  - 

Date 日期: \_\_\_\_\_ Telephone 联络号码: \_\_\_\_\_

Name of Bank 银行名称: \_\_\_\_\_ Branch 分行: \_\_\_\_\_

Bank Account Number 银行户口号码: \_\_\_\_\_

 \* Thumbprint (s) / Signature (s)  
 拇指印或签名

 I / We hereby instruct the bank to process the Home Nursing Foundation's instructions to debit my / our account.

**Part 2: For HNF Use**

Bank                      Branch

      

 Beneficiary: **Home Nursing Foundation**

Billing Organization's Reference Number:

                  

Bank                      Branch                      HNF's Account No:

            

*Note: All donations made to HNF will qualify for 250% tax deduction. The tax deduction will be automatically included in your tax assessment if you provide us with your NRIC/FIN/UEN. If you wish to receive an email receipt of your donation, kindly provide us with your email address. Hard copy receipts are only issued for donations above \$50, and only upon request via email to Fundraising@hnf.org.sg or call to 6854 5503.*

**For Financial Institution's Completion**

To: Home Nursing Foundation

This Application is hereby REJECTED. Please tick for the following reason (s):

- |   |   |
|---|---|
| <input type="checkbox"/> Signature / Thumbprint# differs from Financial Institution's records | <input type="checkbox"/> Wrong account number                   |
| <input type="checkbox"/> Signature / Thumbprint# incomplete / unclear                         | <input type="checkbox"/> Amendments not countersigned by donors |
| <input type="checkbox"/> Account operated by Signature / Thumbprint#                          | <input type="checkbox"/> Others: _____                          |

\_\_\_\_\_  
Name of approving officer

\_\_\_\_\_  
Authorised Signature

\_\_\_\_\_  
Date

\* For thumbprint, please proceed to the branch with your identification card.

# Please delete where applicable

+ In accordance with the Charities Act (Chapter 37), individual and corporate donors have to include their NRIC or UEN numbers respectively for tax deduction.

