

Thank you for your donation. Please complete the form below and return via mail to:  
**Christian Outreach to the Handicapped, Blk 414 Tampines St 41 #01-301, Singapore 520414**



Your gift is gratefully received. May God bless you.

### Donation By GIRO

I wish to make the following donation to Christian Outreach to the Handicapped by GIRO

S\$ \_\_\_\_\_ per month       S\$ \_\_\_\_\_ per year

### Application Form For Interbank GIRO

#### Part 1: For Donor's completion

Date:	Name of Billing Organisation: <b>Christian Outreach to the Handicapped</b>
To: (Name of Donor's Bank)	Donor's Name:
Branch:	Donor's NRIC/FIN. No.:
Bank Code:	Donor's Address:
	Donor's Email:

- I/We hereby instruct you to process Christian Outreach to the Handicapped's instructions to debit my/our account.
- You are entitled to reject Christian Outreach to the Handicapped's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- 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 Christian Outreach to the Handicapped:

Donor's Name(s) as in Bank Record:	Company Stamp/Thumbprint(s)*/Signature(s): (as in bank's record)
Donor's Bank Account Number:	
Donor's Contact Number(s): Tel:  Fax:  Handphone:	

\* For thumbprints, please go to the branch with your identification

#### Part 2: For Christian Outreach to the Handicapped Completion

Bank	Branch	COH Account No.	COH Donor Reference No.
7 1 7 1 0 2 8	0 2 8	0 1 0 4 0 4 9	

Bank	Branch	Account No. To Be Debited

#### Part 3: For Bank's Completion

To: Christian Outreach to the Handicapped

This Application is hereby REJECTED (please ✓) for the following reason(s):

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

\_\_\_\_\_  
 Name of Approving Officer                      Authorised Signature                      Date