

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: Christian Outreach to the Handicapped
To: (Name of Donor's Bank)	Donor's Name:
Branch:	Donor's NRIC/FIN. No.:
Bank Code:	Donor's Address:
	Donor's Email:
<p>a. I/We hereby instruct you to process Christian Outreach to the Handicapped's instructions to debit my/our account.</p> <p>b. 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.</p> <p>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 Christian Outreach to the Handicapped:</p>	
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 3 7 5	0 3 8	3 6 6 3 1 7 3 3 8 1	

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