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'China Children's Health Fund' Monthly Donation Programme

「中國兒童健康基金」每月捐款計劃

	Code: CPY-OTH-WF
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I would like to make a monthly donation of 我願意每月捐款 □ HK\$280 □ HK\$880 □ HK\$880						
Other donation amount 其他捐款金額:HK\$(Please specify 請註明)						
Donor information 捐款人資料 Name 捐款人姓名*:		Donor no.捐款人號碼:				
(Mr 先生 / Ms 女士 / Ms 小如 Address 地址*:	围)		(If applicable	曾捐款者適用)		
		birth 出生日期:	,	(A.B.A. [] N.O.(/T.)		
Daytime tel. no. 日間聯絡電話*: E-mail		oirtn 山土口朔 on donation receip		(MM 月/YY 年)		
電郵* :	收據人類	•	ι			
Donation method 捐款方法						
□ Credit card 信用卡: □ American Express □ VISA □ Mastercard						
Credit card no. 信用卡號碼:Expiry date 有效日期:/(MM 月/YY 年)						
Name of cardholder 持卡人姓名: Signature 持卡人簽署:						
(Mr. 先生/ Ms. 小姐	I/ Mrs. 女士)					
□ Autopay (Direct Debit) 自動轉賬:		<u> </u>	Please fill in wi	th BLOCK Letters		
Direct Debit Authorisation Fo	rm 日 野 特 版 技 催	青	請用英文	文大楷填寫		
Name of Party to be Credited (The Beneficiary) 收款的一方 (收款人) 聯合國兒童基金香港委員會 Hong Kong Committee for UNICEF	Bank No. 銀行號碼 004	Branch No. 分行號碼 567		redited 收款賬戶之號碼 543002		
My/ Our Name(s) as recorded on Statement/ Passbook 本人(等)在	_ ·		Savings/ Current Acco			
結單/存摺所紀緣的名稱 (in BLOCK Letters 請以英文正楷填寫)	本人(等)的銀行及分行的名稱		本人(等)之儲蓄/來往戶口號碼			
Maximum payment limit for each month	Bank No.	Branch No.	捐款人號碼			
每月最高付款限額 HK\$	銀行號碼	分行號碼	Donor No.			
My/ Our Bank Account Signature (s)						
本人(等) 銀行戶口的簽署	For Official Use Only 此 Debtor's Reference	IFor Bank Use	Signature Verified 簽名樣式			
	支賬參考	銀行填寫	Signature vermed			
You must provide the information marked with an asterisk on this form (*). If you do not provide this information to us, then we may not be able to process or administer your donations or applications. 思道模件未格上榜す**。 的實料・如思来的な企画的目標。 如果我们可能是法理规则要理的问题或申请。 I Mive hereby unthorise myour abunds may on under marked bank to refer than the resonant members or no not not of the above named Bank to the office than the resonant members or not not of the above named Bank to the office than the provided always that the amount of any one such transfer shall not exceed the limit indicated above. I Mive parest transfer dust in your Bank shall not be colleged to an on sociation whether or no not note of any such brander or news and note has been given to melus. I Mive understand that they must maintain sufficient funds in the account one businesses day (before the close of branch banking hours) before the transfer date (as specified in the instructions received by mylour Bank from the beenfeldary and order than the mount of the same than the close of branch banking hours) before the transfer date (as specified in the instructions received by mylour Bank from the beenfeldary and order than the mount of the same than the close of branch banking hours) before the transfer date (as specified in the instructions received by mylour Bank from the beenfeldary and order than the mount of the bank may level to suand changes and may cancel this authorisation to melus. For the avoidance of doubt, the Bank may cancel this authorisation at any time without prior notice to melus. For the avoidance of doubt, the Bank may cancel this authorisation at any time without prior notice to melus, and the provides of any cancel that authorisation to melus. For the avoidance of doubt, the Bank may cancel this authorisation at any time without prior notice to melus, we will not a continuous presented of 30 months, mylour Bank resonant the direct debt in authorisation and the same will be given at least two socking days prior to the date on which such						
Signature 簽署: X						
i. If you choose to use Autopay, please send the original form to us. Credit card donation could be made by faxing this form to (852) 2834 0996. 如選擇自動轉 賬捐款 · 請寄回表格正本予本會;信用卡捐款可傳真至 (852) 2834 0996。 ii. Any alteration requires signature. 任何塗改請簽名以示確認。						

Transaction will normally be processed before the 10th of the month. 銀行通常會在每月 10 號前過戶。

Donations of \$100 or more are tax-deductible. HK\$100 或以上捐款可申請免稅。

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