



Charity IPC No.: 000710
UEN No.: T02SS0212H

Fill up this monthly donation form
and mail it back to us.

Mailing address
Blk 151 Bukit Batok St.11
#03-248
Singapore 650151

Please allow **3 to 4 weeks**
for GIRO application processing.

Your desired monthly
donation will be automatically
deducted on the **10th** of every
month. If unsuccessful for the
first attempt, the subsequent
deduction will be on the **24th** of
the same month.

Your donations are entitled to **2.5**
times tax deduction.

Kindly note that we provide tax
deduction receipts for donations
only upon request.

Promisedland Community
Services respects donors'
confidentiality. By submitting our
donation forms, we have added
you into our donor list for
processing donations, donor
relationship management, fund
raising and communications.

MONTHLY DONATION FORM

DONOR PARTICULARS

Name _____ NRIC/FIN/UEN _____
(Dr/Mr/Mrs/Mdm/Ms / Company Name) (Required for automatic tax deduction)
Address _____ Postal code S(_____)
Tel _____ Email _____

MONTHLY DONATIONS BY INTERBANK GIRO

Part 1 : For Donor's Completion

Name of Bank _____ Bank Account Number _____
Name as in Bank's record _____

I would like to make a monthly contribution of :

☐ \$30 ☐ \$50 ☐ \$80 ☐ \$100 ☐ Others: _____

- a) I/We hereby instruct you to process BO's instructions to debit my/our account.
b) You are entitled to reject BO's debit instructions 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.
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; or upon the Bank's receipt of the notice of expiry from the BO.

Date Signature(s) or thumbprint(s)# as in bank record

Part 2 : For Promisedland Community Services - Lifeblood Centre's Completion

Billing Organisation: Promisedland Community Services - Lifeblood Centre

SWIFT BIC	Billing Organisation's Account No.
OCBCSGSGXXX	533 - 704979 - 001

Reference No.

SWIFT BIC	Account No. To Be Debited

Part 3 : For Financial Institution's Completion

To: Promisedland Community Services - Lifeblood Centre,

This application is hereby REJECTED for the following reason(s):

- ☐ Signature/thumbprint# differs from Financial Institution's records ☐ Wrong Account Number
☐ Signature/thumbprint# incomplete/unclear# ☐ Amendments not countersigned by customer
☐ Account operated by signature/thumbprint# ☐ Others

Name of Approving Officer Authorised Signature Date

For thumbprints, please go to the branch with your identification.



For tax-deductible receipt, please provide us with your name, tax reference number (ie. UEN/NRIC/FIN) and contact number on the reverse of the cheque.

Tel: 6566 9570 Fax: 6560 3256 Website: www.promisedland.org.sg

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Promisedland Community Services is an approved Institution of a Public Character (IPC), eligible donors are allowed tax deduction of up to 250% of the donated amount.

Please fold along the dotted line.



Postage will be
paid by
addressee. For
posting in
Singapore only.

BUSINESS REPLY SERVICE
PERMIT NO. 07829



Promisedland Community Services
Robinson Road Post Office
P.O. Box 375
Singapore 900725

Please fold along the dotted line.

Seal here.

Do not staple.

Seal here.

Do not staple.