

Founded in 2008, Club-100 @ North West is championed by a network of compassionate donors who want to do good and do more for the less-privileged in our community.

Your contributions will provide less-privileged residents with timely and sustained support, in more areas of urgent and essential needs.

Rising Cost of Living

Emergency Situations at Home

Financial Strain of Raising Children

Unforeseen Essential Household Expenses

PERMIT NO. 05819

NORTH WEST COMMUNITY DEVELOPMENT COUNCIL

900 SOUTH WOODLANDS DRIVE #06-01
WOODLANDS CIVIC CENTRE

SINGAPORE 730900

BUSINESS REPLY SERVIC

 North West A Giving Community

Join Club-100 @ North West and become part of **A Giving Community** to create a lasting impact to the lives of less-privileged families!

Postage will I paid by Singapore only For posting in addresse



DONATION FORM

(a) 100% of your donation goes towards the Club-100 @ North West.

(c) North West CDC would provide the details of your donation to IRAS and the tax deduction would be auto-included in your

(b) You will receive 250% tax deduction for your donations.

income tax assessment.

Referred by:

MY PARTICULARS	GIRO FORM
(Please tick) O Individual O Organisation	Name of Bank
NRIC / UEN No (Required for submission to IRAS for tax deduction)	Name(s) as in Bank Records
○ Name of Donor ○ Contact Person of Organisation (Dr/Mr/Mrs/Ms/Miss/Mdm) as per NRIC)	My/Our* Bank Account Number
	Monthly Donation (Please Tick)
(Please underline surname)	○ \$100 ○ Other Amount: \$
Name of Organisation Designation Tel (HP) (o) Mailing Address Singapore () Email	 I/We hereby instruct the Bank to process the BO's instructions to debit my/our account. The Bank is entitled to reject the BO's debit instructions if my/our account does not have sufficient funds and charge me/us a fee for this. The Bank may also at its 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 The Bank's written notice sent to my/our address last known to the Bank; Upon the Bank's receipt of my/our written revocation: or Upon the Bank's receipt of the notice of expiry from the BO.
Date of Birth(dd/mm/yy)	My/Our* Signature(s)/Thumbprint(s)* (As in Bank's records)
Nationality	
Race (C / M / I / O)	Date
Important Notes	*Please allow 4-6 weeks for processing

Thank you!

Your contribution is greatly appreciated.

FOR BANK'S COMPLETION ONLY

To: North West Community Development Council 900 South Woodlands Drive, #06-01 Woodlands Civic Centre, Singapore 730900 Tel: 6248 5566

This Application is hereby APPROVED/REJECTED* If rejected, for the following reason(s) (please tick)

- Signature/Thumbprint* differs from the Financial Institution's records
- Signature/Thumbprint* is incomplete/unclear*
- Account operated by signature/thumbprint
- Wrong Account Number
- O Amendments not countersigned by customer

Others			

Name of Approving Officer / Signature / Date

FOR OFFICIAL USE ONLY

Name of Billing Organisation ("BO")
NORTH WEST COMMUNITY DEVELOPMENT COUNCIL

No
530

North West CDC A/C No 530054386001

BO's Donor's Reference No.	

SWIFT BIC	A/C to be Debited

TO FIND OUT MORE

6248 5566 / 8862 6299

Visit
www.northwest.cdc.gov.sg
Email to
northwestcdc_partnerships@pa.gov.sg
Contact

