



Support
FAMILIES and
INDIVIDUALS
in need with their
daily necessities



Lend a helping hand
or befriend lonely
SENIORS
who need your
company



Help
CHILDREN
from low-income
families level up with
their peers at school

CENTRAL SINGAPORE CDC INVITES YOU TO
DONATE TO
"SEED A LIFE"
DONATION PROGRAMME

Donate now and change a life.
Monthly, yearly, or one-off donations are welcome.
Donations will receive tax exemption.
Please fill in the donation form on the facing page
and mail it to Central Singapore CDC.



For more information on the CDC's programmes,
visit www.cdc.org.sg/centralsingapore or
write to pa_centralsingapore@pa.gov.sg.



“SEED A LIFE” DONATION FORM

Mail to **Central Singapore Community Development Council (Finance Department)** at 490 Lorong 6 Toa Payoh, HDB Hub BizThree, #07-11 Lift Lobby 2, Singapore 310490.

MY PARTICULARS

Profile <input type="checkbox"/> Individual Donor <input type="checkbox"/> Corporate Donor		Name (Dr / Mr / Mrs / Ms / Mdm)	
Address & Six-Digit Postal Code			
Telephone		Fax	Email
NRIC/FIN No. <small>*NRIC/Fin is required for automatic tax deduction.</small>		Company UEN No. <small>*Only applicable for Corporate Donors.</small>	

MY CONTRIBUTION

Monthly Contribution <input type="checkbox"/> \$500 <input type="checkbox"/> \$200 <input type="checkbox"/> \$100 <input type="checkbox"/> \$50 <input type="checkbox"/> Others (please state):	One-Time Contribution <input type="checkbox"/> \$500 <input type="checkbox"/> \$200 <input type="checkbox"/> \$100 <input type="checkbox"/> \$50 <input type="checkbox"/> Others (please state):
--	---

INTERBANK GIRO APPLICATION

For Applicant's Completion (Please do not use correction tape/fluid)		For Bank's Completion	
Name as in Bank Records		To: Central Singapore Community Development Council 490 Lorong 6 Toa Payoh, HDB Hub BizThree, #07-11 (Lobby 2), Singapore 310490	
Name of Bank		This application is hereby REJECTED for the following reason(s):	
Bank Account No.		<input type="checkbox"/> Account operated by signature/Thumbprint <input type="checkbox"/> Signature/Thumbprint differs from Bank's records. <input type="checkbox"/> Signature/Thumbprint is incomplete/unclear. <input type="checkbox"/> Wrong Account No. <input type="checkbox"/> Amendment not countersigned. <input type="checkbox"/> Others (please state): _____ _____ _____	
(a) I/We hereby instruct the Bank to process the Central Singapore Community Development Council's instruction to debit my/our account. (b) The Bank is entitled to reject the Central Singapore Community Development Council's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. (c) This authorisation will remain in force until: i. The Bank's written notice sent to my/our address last known to the Bank; ii. Upon the Bank's receipt of my written revocation; or iii. Upon the Bank's receipt of the notice of written revocation from the Central Singapore Community Development Council.		_____ Name/Signature of Officer-In-Charge _____ Date	
_____ Signature/Thumbprint of Applicant (As in Bank's Records) For thumbprint, please approach the Bank for verification			

FOR OFFICIAL USE ONLY

Name of Billing Organisation (BO) Central Singapore Community Development Council		
SWIFT BIC OCBCSGSGXXX		Central Singapore CDC A/C No. 501412225001
Donor's Reference No.	SWIFT BIC	A/C to be Debited

Important Notes:
 1. 100% of your donation goes towards helping needy individuals and families in the Central Singapore District.
 2. You will receive a 250% tax deduction for your contribution.
 3. Central Singapore CDC will provide the details of your donation to IRAS for the tax deduction to be included in your income tax statement.

THANK YOU FOR HELPING US BUILD A BETTER LIFE FOR OUR RESIDENTS.