DONATION VIA GIRO APPLICATION FORM

For Donor's Completion

I wish to support by making a Monthly Contribution of: ☐ Others $ _____ ☐ $150 ☐ $100 ☐ $60 ☐ $30

Name as in Bank Record _____ NRIC/FIN No. _____

Address _____ Contact (H) _____ (HP) _____

Name of Bank _____ Branch _____ Email _____

Bank A/C No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

* I/We hereby instruct you to process Cornerstone Community Services's instructions to debit my/our account.

* You are entitled to reject Cornerstone Community Services'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.

* This authorisation will remain in force until it is terminated by my written notice sent to Cornerstone Community Services.

_____
Signature as in Bank Record

_____
Date

For Cornerstone Community Services's (CCS) Official Use Only

Bank	Branch	CCS A/C No.						Bank	Branch	Account No. To Be Debited						

CCS Donor Reference No.								

For Bank's Official Use Only

_____
Name of Approving Officer

_____
Authorised Signature/Date

To: Cornerstone Community Services
This application is hereby REJECTED for the following reason(s):

○ *Signature/Thumbprint differs from Bank record*

○ *Signature/Thumbprint incomplete/unclear*

○ *Account operated by signature/thumbprint*

○ *Wrong account number*

○ *Amendments not countersigned by customer*

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