

DONATION FORM

11 JALAN UBI #02-12 SINGAPORE 409074 | TEL: 6479 6252 | EMAIL: PARTNERSHIPS@APSN.ORG.SG

PART I: DONATION AMOUNT									
I am pleased to make a contribution of the following amount:									
ONE TIME DONATION									
□\$1000	□\$500	□\$250	□\$100	□\$50	Other Amount				
MONTHLY DONATION									
□\$250	□ \$200	□ \$100	□ \$50	□ \$10	Other Amount				

PART II: DONOR DETAILS

Name / Company / Event	Dr / Mr / Mrs / Mdm / Ms		
NRIC / FIN / UEN No.*		Tax Deductible Receipt Issuance:Image: Yes, by mailingImage: Yes, by email	🗆 No
Mailing Address		Postal Code ()
Contact No.	(HP)	(H / O)	
Email			

*Your donation is eligible for 2.5 times tax deduction. Please provide your **NRIC/FIN/UEN No.** for submission to Inland Revenue Authority of Singapore for automatic tax deduction.

- A tax deductible receipt will be issued only when full donor's details are provided, upon request.

PART III: DONATION METHOD

🗆 Cash	□ GIRO (Please complete form on the reverse page)			
□ Cheque Crossed & made payable to "APSN LTD – Centre For Adult A/C 1"	Bank & Cheque No.			
DBS Current 072-035558-0	Transaction Ref.			
□ PayNow - APSN LTD – Centre For Adult A/C 1 UEN – 202018265WCA1	Transaction Ref.			
Online Platform	□ Giving.sg □ Give.asia □ Benevity Ref. No			

PART IV: FOR APSN'S COMPLETION

Collect	ted by:	Witnessed by:	Verified by:	Donation Tax Deductible: 🗌 Yes 🛛 No			
				Funds Designated to:			
				□ APSN Training and Education			
				□ CFA Operations and Programmes			
				□ Others:			
Name	:	Name:	Name:				
Date:		Date:	Date:				

NOTE: APSN respects donors' confidentiality. By submitting our donation forms, we have added you into our donor mailing lists for processing donations, donor relationship management, fund raising and communications. To opt out of receiving communication materials for our donors, kindly email partnerships@apsn.org.sg with the subject heading "Unsubscribe".

Thank you for your support!