

Your donation will be eligible for 250% tax exemption.



ACRES MONTHLY DONATION FORM
“YOUR SUPPORT MEANS THE WORLD TO ANIMALS”

Part 1: For applicant’s completion (complete space indicated with ✓)

APPLICATION FORM FOR INTERBANK GIRO

✓Date of Application: ____ / ____ / 20____
 Day/ Month/Year

Name of Billing Organization (“BO”):
ANIMAL CONCERNS RESEARCH & EDUCATION SOCIETY

✓To: Name of Applicant’s bank: _____ ✓Branch: _____

I wish to make monthly Interbank GIRO contributions in the amount indicated with tick (✓)

✓ \$100 \$80 \$60 \$40 \$20 Other Amount (please indicate) \$ _____

- (a) I/We hereby instruct you to process the BO’s instructions to debit my/our account.
- (b) You are 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. 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 authorization 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 through the BO.

Applicant’s Name as shown in Bank records ✓ _____
 (please underline surname)

Applicant’s Bank Account Number ✓ _____ Applicant’s NRIC/FIN/Passport No. ✓ _____
 (Please note that by supplying your full name and correct NRIC/FIN number you will receive automatic tax relief benefits from IRAS)

Applicant’s Address: ✓ _____

Applicant’s Contact Numbers ✓ _____ (H) _____ (O) _____ (HP)

Applicant’s Email Address ✓ _____ Date of Birth ✓ _____

✓ _____

Date ✓ ____ / ____ / ____

My/Our Signature / *Thumbprint

Day/month/year

* for thumbprints, please go to the branch with your identification

Part 2: For Billing Organization’s Completion

Bank	Branch	B.O.’s Account No.											
7	3 3 9	5	2	2	0	9	6	1	2	2	0	0	1

Bank	Branch	Applicant’s Account No. to be debited											

Applicant’s Membership No.										

Part 3: For Financial Institution’s Completion

TO: ANIMAL CONCERNS RESEARCH & EDUCATION SOCIETY

This Application is hereby REJECTED (please tick) FOR THE FOLLOWING REASON(S): *delete where applicable

- Signature / Thumbprint* differs from Financial Institution’s records
- Signature / Thumbprint* incomplete / unclear
- Account operated by signature / thumbprint
- Wrong account number
- Amendments not countersigned by customer
- Others: _____

Name of Approving Officer: _____ Bank’s Authorized Signature: _____ Date: _____

Please send application form back to: ACRES: 91 Jalan Lekar Singapore 698917