「樂施之友」更改捐款戶口表格

保密 Confidential

"Oxfam Partner" donation account amendment form

8	
樂施會 OXFAM	無窮世界 World Without Poverty

捐款者個人資料 Donor's Personal Information	(請盡量以英文	工工楷填寫 IN BLOCK LETTERS)	OXFAM Without Povert
英文姓名: 姓 Surname 名 First name 捐款者編號 Donor number:		name :	性別 Sex:
地址 Address:			
聯絡電話 Tel.:(日間 Day)(晚間			
電郵 E-mail:		_ 通訊語言 Language □ 中文 C	Chinese 🔲 英文 English
捐款方法 Donated by: 請選擇 ☑ 信用	」 卡 Credit Card	I 或 or 図 自動轉賬 Autop	pay
每月捐款額(澳門幣) Monthly Donation Amount			
信用卡 Credit Card □ VISA □ MASTER 信用卡號碼 Card No.:	信用 持卡 后過數·每月捐款將於該信s s will normally be process	卡有效期至 Card expiry date: 人簽名 Cardholder's signature: _	月 mth / 年 yr
自動轉賬表格 (只限中國銀行澳門分行/中 Autopay Authorization Form For Bank Accor (Please send back the original to Macau Office) 港幣捐款 致:中國銀行澳門分行/中國銀行(澳門) 本人(等)/本公司茲授權中國銀行澳門分行/中國銀行(澳門) (以下簡稱貴銀行)以下事項(以"小選擇所需項目):本人(等)/本公司於貴銀行開立之賬戶(賬戶號碼附誌如下)內支取款項・繳付下述機構的捐款・直至另行通知為止。 □申請代付款; □修改代付款; 本人(等)/本公司知悉及遵守下述條款辦理:	To: BANK OF I/We hereby aut to as "the Bank" To effect transfereferred to as "the valid until furthe alpression of unsu. We ferred to as "the bank" To effect transfereferred to as "the valid until furthe alpression of unsu. We further agre 1. The Ba Benefic 2. Under 1. The Ba Benefic 2. Under 1. The Ba Benefic 5. The Ba Benefic 5. The Ba Benefic 5. The Ba Benefic 6. The Ba Benefic 7. If this "or/and third page 1. The Ba Benefic 2. Under 1. The Ba Benefic 2. Under 1. The Ba Benefic 3. The Ba Benefic 4. Service 5. The Ba Ba Benefic 4. Service 5	k of China Macau Branch / Bank of 算。All donations in HKD are conve CHINA MACAU BRANCH/ BANK OF CH- horize Bank of China Macau Branch / Bank of Cl to act as per instruction(s) (marked with "\") be rs from my/our account specified below to the ac the Beneficiary"), details of which specified below rnotice.	China (Macau) rted to MOP. IINA (MACAU) hina (Macau) (hereinafter referred low: coount of the institution (hereinafter . This authorization shall remain at of debit authorization at such sum or sums as advised by the spille for any consequence(s) as a result count. be given by notice in writing. This wen to and received by the Bank. For 3 sufficient available fund in my/our said ply with or act further with this said account. on any other third party if the Bank finds it to be transferred into the currency the Bank. The Bank, I/We agree to take all the legal the details of the said form to any other
澳門樂施會 Oxfam in Macau18-01-01-20-840951本人(等)/本公司之銀行戶口姓名 My / our Account Name:本人(等)/本公司之銀行戶口號碼 My / our Account Number:	□港幣 HKD	本人(等)/本公司銀行戶口之簽署 My / our signature (s) as recorded at	your bank
	□澳門幣 MOP		
此欄由樂施會及銀行填寫 For Official Use Only	由銀行填寫 For E	Bank use	
樂施會檔案編號 (合同號碼) Debtor's reference: 門宋玉生廣場 258 號建興龍廣場 18 樓 F 室 Alameda Dr.			a Long 18 Ander F Med

傳真 Fax: (853) 2875 7667 澳門免費查詢熱線 Macau Toll Free Hotline: 0800809 電話 Tel: (853) 2875 7750

香港北角馬寶道 28 號華匯中心 17 樓 Oxfam Hong Kong, 17/F China United Centre, 28 Marble Road, North Point, Hong Kong 電話 Tel: (852) 3120 5000 傳真 Fax: (852) 2590 6880 電郵 Email: ds@oxfam.org.hk 網址 Website: www.oxfam.org.hk

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