

**SINGAPORE CHRISTIAN HOME  
DONATION FORM**

Mr/Mdm/Ms/Rev/Dr/Prof (*Please delete where inapplicable*)

Name: \_\_\_\_\_ NRIC/FIN No. \_\_\_\_\_

Company Name: \_\_\_\_\_ ROB/ROC No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ (S )

Contact: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_

(Mobile) \_\_\_\_\_ (Fax) \_\_\_\_\_

Email: \_\_\_\_\_

Amount: \_\_\_\_\_ Mode of Payment : \_\_\_\_\_

Wish to claim tax benefit ? YES  NO

If yes, please read the following statement and sign.

“I, hereby give consent to Singapore Christian Home to submit data collected to IRAS for tax deduction purpose.”

\_\_\_\_\_  
Signature  
Date