I would like to support **UNHCR** The UN Refugee Agency through **Monthly Donation** 

MON I	HLY DO	NATIO	NAMO	UNT 每月捐	款額		
☐ HK\$200	☐ HK\$300	) □ HK	\$500 🗆	HK\$			
MY DE	ΓAILS 個	人資料 (P	lease wri	te in BLOCK Lett	ters 請以英	文正楷填寫	寫)
	sh:Mr/Ms/Mis 七生/女士/小姉		(Family N	ame姓)	(First Na	ame名)	
Name in Ch 中文姓名:				HKID No. 身份證號碼:			( )
Language: 通訊語言:	☐ Chinese	中文 🗖 Eng	lish 英文	Date of Birth 出生日期:	DD H	MM 月 /	YY 年
E-mail: 電郵:							
Mobile: 手提:				Res./Office Tel 家居 / 辦公室電	i話:		
Address 地址:	Flat/Room室	Floor樓	Block座	Bldg/Mansion/House大廈			
Court/Estate/Street/Re	oad 屋苑/街道		District 地區		IIV.T.	: //ZT NI	A Internal
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use your contact communications data will be kept materials or com向閣下發出收據,	et information fr s and fundraising confidential and imunications, ple	om time to materials to i handled in ac ase tick the be 口提供資訊及資	time to issunform you or cordance with ox. 聯合國難 資料,讓閣下分	(UNHCR) and any servi the receipts, conduct do f programmes, activities th applicable laws. In the 民署及本署委託的服務提 知悉本署的事務、活動和記 格加上剔號。	nor survey a and appeals event that yo 共者,會不時說	nd to prov of UNHCR ou do wish to 透過閣下提供	ride you w . All persor o receive su 供的聯絡方法
CREDIT C	CARD DONA	TION 信	用卡捐款	□ VISA / MA	STER	America	n Expres
Bank Name	發卡銀行:						
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Bank Name 發卡銀行:			
Credit Card No.信用卡號碼:			
Card Expiry Date 有效日期至*:	(valid for 3 months 三個月有效)		
Cardholder's Name 持卡人姓名:			
Cardholder Signature: 信用卡持有人簽署			
* Valid after expiry date until further notice 每月掲款將在信用卡到期後自動延續。			

Credit card transactions will normally be processed on the 15th day of the month 信用卡每月約15號過數。

Donations of HK\$100 or above are tax deductible. 捐款港幣一佰元或以上可扣減稅款。 Cash donation is not accepted. 恕不接受現金捐款

Venue: 地 點		<b>Donor No:</b> 捐款者編號		
Date: 日期	Time: 時間	Entry Date: 處理日期		
<b>Fundraiser:</b> 籌募大使		Remarks1: 備註 1		
Remarks2:				



Room 911, Yau Ma Tei Carpark Bldg, 250 Shanghai Street, Kowloon, Hong Kong 香港九龍上海街250號油麻地停車場大廈911室

街頭月捐聯席 **F2F Monthly Giving Alliance** Tel 電話:(852)23883278 Fax 傳真: (852) 2780 0961



DIDECT DERIT	<b>AUTHORISATION FORM</b>	白勈繭岠埓媌聿
	AUTHONISATION FORM	

Name of party to be credited (The Beneficiary) 收款之一方名稱 (收款人)

<b>United Nations High Commissioner for Ref</b>	fugees(UNHCR) 聯合國難民署
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Branch no. Bank no. Account No. to be credited 分行編號 銀行編號 收款帳戶之號碼

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My/our full name(s) with my/our Bank 本人(等)之銀行戶口姓名 Mr/Ms/Miss 先生/女士/小姐					
My/our full addres	My/our full address 本人(等)之地址				
Bank and Branch	Bank and Branch name 銀行及分行名稱				
Bank no. 銀行編號	Branch no. 分行編號	Savings/ Current Account No. 本人(等)之儲蓄 / 來往戶口號碼			
Maximum payment limit for each month 每月最高付款限額			HKID No. 香港身份證號碼		
				(	)
My / Our signature	e(s) 本人 (等) 之簽	名 (銀行戶口之簽名)	Date 日期		

For UNHCR Use Only 此欄只供聯合國難民罢填寫

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Debtor's Reference 支帳參考	For Bank use 銀行填寫	Signature verified			

Only originals are accepted, any alteration requires signature.

請交回表格正本,任何塗改請簽名以示確認。

- 本人(等)現授權上述之銀行(「該銀行」),根據收款人不時給予該銀行之指示,自本人(等)上述戶口轉帳予收款人。但每次轉帳金額不得超過以上指定之限額。
  本人(等)同意該銀行毋須證實該等轉帳是否已通知本人(等)。
- 3. 如因該等轉帳而令本人(等)之上述戶口出現透支(或令現時之透支增加),本人(等)會共同及各別承擔全部責任。 4. 本人(等)確證在本授權書之簽名,與本人(等)上述戶口於該銀行簽署紀錄完全相同。
- 本人(等)同意如上述戶口並無足夠款項支付有關轉帳,該銀行有權不予辦理且可收取有關之手續費用,該等費用一
- 概由本人(等)支付。 6. 本人(等)同意取消或更改本授權書之任何通知,須於取消或更改生效日最少兩個工作天之前交予該銀行。 7. 本授權書將繼續生效直至另行通知為止人但該銀行將不受此限,並可將超過兩年未有任何過帳紀錄之直接付款授權 宣告失效,及可删除該授權紀錄而毋須另行通知。
- 1. I/We hereby authorise my/our above-named bank (the "Bank") to effect transfer from my/our above-mentioned account to the above-named Beneficiary in accordance with such instructions as the Bank may receive from the Beneficiary from time to time, provided always that the amount of any one such transfer shall not exceed the limit
- 2. I/We agree that the Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.
- 3. I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdaft) on my/our above-mentioned account which may arise as a result of any such transfer(s).
- 4. I/We confirm that my/our signature(s) on this authorisation is/are the same as filed with the Bank for the operation of my/our above-mentioned account to be debited for the transfer.
- 5. I/We agree that should there be insufficient funds in my/our above-mentioned account to meet any transfer hereby authorised, the Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may make the usual service charge to be paid by me/us.
- 6. I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to Bank shall be given at least two working days prior to the date on which such cancellation or variation is to take effect.
- 7. This authorisation shall have effect until further notice. But if there is no transaction being recorded under this direct debit authorisation for over two years, the Bank may delete this direct debit authorisation without giving any

NOTE: Transactions will normally be processed on the 10th day of the month. 每月約10號過數。