「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 DXFAM	無窮世界 World Without Poverty

同款者個人資料 Donor's Personal Information	款者個人資料 Donor's Personal Information (請盡量以英文正楷填寫 IN BLOCK LETTERS)					
文姓名: 姓 Surname 名 First name	中文姓名 Chinese name:			性別 Sex:		
	身份證號碼 ID Card No.:					
型址 Address:						
終格電話 Tel.:(日間 Day)(晚間	Evening)					
郵 E-mail:		_ 通訊語言	Ē Language □ 中文 Chi	nese 🚨 英文 English		
局款方法 Donated by: 請選擇 ☑	信用卡 Credit (Card 或	tor 🛛 自動轉賬 A	Autopay		
專月捐款額(澳門幣) Monthly Donation Amount	MOP					
☐ 信用卡 Credit Card ☐ VISA ☐ MASTER	☐ UnionPay (青傳真至 P	lease fax to 853-28757667			
	信用卡號碼 Card No.:					
(信用卡每月捐款將在收到此表格後約 10 個工作天生效·並會在每月 10 至 15 號左 become effective 10 working days after receipt of this form. Thereafter, transactio continue after the expiry date of the credit card and upon renewal of the cr	E右過數。每月捐款將於該信 ns will normally be processe	用卡到期再續復 ed around the 1	·····································			
■ 自動轉賬表格 (只限大豐銀行戶口持有人)				iginal to Macau Office)		
Autopay Authorization Form (For Bank Acc	count holder of	Tai Fung	Bank)			
11	□修改代付款 Ame	ndment of	debit authorization			
港幣捐款會兌換為澳門幣計算。All donations in HKD are co	nverted to MOP					
致: 大豐銀行	To: TAI FUNG	To: TAI FUNG BANK Ltd.				
直至另行通知為止·本人/吾等授權大豐銀行(以下簡稱「銀行」 在本人/吾等於 貴銀行開立之帳戶支付按以下所述機構(以下)「受益人」)提供的捐款金額·儘管此舉可能引致本人/吾等帳戶出 支或增加透支。如本人/吾等帳戶並無足夠存款·銀行有權不予支等款項·亦無義務通知本人/吾等·再者如本人/吾等之帳戶連續三帳戶可用餘額不足而未能支付帳戶或連續一年未有發生有關之轉。 易·則 貴銀行可有權不經通知而撤銷執行此項授權之指令。 貴銀行徵收之服務費用·可由本人/吾等的帳戶內支付。本人/吾等	簡稱 規 技 技 技 茨 大 帳 交 大 大 大 大 大 大 大 大 大 大 大 大 大 大 大 大 大	Until further notice I/We hereby authorize Tai Fung Bank Limited (hereinafter referred to as "the Bank") to effect transfers from my/our account specified below to the account of the institution (hereinafter referred to as "the Beneficiary"), the detail of which is specified below, such sum or sums as the Beneficiary may from time to time advise the Bank, notwithstanding that to do so may result in an overdraft or an increase of the overdraft on my/our account provided that the Bank will be entitled not to honour such payments should my/our account not contain the necessary funds and the Bank is under no obligation to notice me/us of such event. If transfers are unable to be effected owing to insufficient funds in my/our said account for three consecutive times or if there is no transfer being effected in my/our said account to a period of twelve months, the Bank may at its own discretion cease to comply with the instructions of this authorization without prior notice to me/us. Service charge of the Bank will be debited from my/ou account. I/We understand that I/We may query the bill with the Beneficiary at any time				
時向受益人查詢帳單。 收款機構名稱(受益人):Name of party to be credited (The B	Seneficiary):					
澳門樂施會 Oxfam in Macau 201-1-100						
CO. ID. 21040103						
本人/吾等在銀行結單/存摺所紀錄之姓名 My / our Name as re Statement/Passbook:	orded on Bank					
本人/吾等之銀行帳戶號碼 My / our Account Number:	□港幣 HKD □澳門幣 MOP	• • • • • • • • • • • • • • • • • • • •				
聯絡電話 Phone no.:		申請日期 Applied D	申請日期 Applied Date			
此欄由樂施會及銀行填寫 For Official Use Only	由銀行填寫 For E	由銀行填寫 For Bank use				
樂施會檔案編號 (合同號碼) Debtor's reference:	核對資料及印鑑	核對資料及印鑑 Verifed 輸入資料 Entered 核對 Approved				

澳門宋玉生廣場 258 號建興龍廣場 18 樓 F 室 Alameda Dr. Carlos d'Assumpção, No.258, Praça Kin Heng Long, 18 Andar F, Macau 電話 Tel: (853) 2875 7750 傳真 Fax: (853) 2875 7667 澳門免費查詢熱線 Macau Toll Free Hotline: 0800809

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 傳真 Fax: (852) 2590 6880 網址 Website: www.oxfam.org.hk 電話 Tel: (852) 3120 5000 電郵 Email: <u>ds@oxfam.org.hk</u>

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The personal data collected will be treated as strictly confidential and will be used by Oxfam and its service providers for the purposes of donation administration, receipt