KWONG WAI SHIU HOSPITAL
廣 惠 肇 留 醫 院
Since 1910

Auction Form

Auction Form 义标福物筹善款

I would like to auction for (please tick→) 我要标的福物是 （请→）

[ ] **Blessing of Prosperity「百福兴旺」**

Bidding Price (标价):

[ ]**Blessing of Offering and Generosity「福惠乐民 惟善至宝」**

Bidding Price (标价):

Personal Particulars 个人资料

Name 姓名：（Dr/ /Mr/ Mrs/ Miss/ Mdm）_____

NRIC 身份证号码：_____

Please fill in NRIC No. for part of your donation to be automatically tax exempted.

Address 地址：_____

_____Postal Code 邮区_____

Tel 电话：_____ （H/ 住家）_____ (Off/公司) _____ （HP/手机）

Email Address 电邮：_____

Corporate Particulars 公司资料

Company's Name 公司：_____

Contact Person 负责人： （Dr/Mr/ Mrs/ Miss/ Mdm）：_____

Address 地址：_____

_____ Postal Code 邮区：_____

Tel 电话：_____ （H/ 住家）_____ (Off/公司) _____ （HP/手机）

Email Address 电邮：_____

Mode of Payment 付款方式

Cheque No.支票号码：_____

Visa / Master Card No. 信用卡号码：Signature: _____ Expiry Date: _____

签名 有效期至

- - -

♥Cheque should be crossed and made payable to "Kwong Wai Shiu Hospital". Please indicate 'Auction' behind the cheque.

♥Kindly send the completed form and cheque to:

Kwong Wai Shiu Hospital
Fund Raising Department
705, Serangoon Road
Singapore 328127

♥Or Fax to 6295 8131. Attention: Fundraising Department

Official Use

Official Receipt No: _____ Receipt Date:_____

Donations are tax-exempted 捐款可扣除所得税