



INTERBANK GIRO APPLICATION FORM

PERSONAL/ COMPANY'S PARTICULARS (DONOR TO COMPLETE)		
Name (as per NRIC/ FIN/ UEN):	NRIC/ FIN/ UEN No.:	
Contact No.:	Email Address:	
*Donation Amount (S\$): _____ <i>*Tax deduction applicable for donations of S\$10 & above</i>	Frequency of Donation: Monthly Deduction Date: 5th day of the month	
PART 1: GIRO DONATION DETAILS (DONOR TO COMPLETE)		
Name(s) in Bank Account:	Bank Swift Code:	
Name of Bank:	Account No.:	
<p>a) I/ We hereby instruct you to process SG Enable Ltd's instructions to debit or credit my/ our account.</p> <p>b) You are entitled to reject SG Enable Ltd's debit instructions if my/ our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.</p> <p>c) This authorisation will remain in force until terminated by your written notice sent to my/ our address last known to you or upon receipt of my/ our written revocation through SG Enable Ltd.</p> <p>d) I/ We hereby warrant that all the information I/ we have submitted in this Form is true and accurate to the best of my/ our knowledge. I/ We also consent to Mediacorp Enable Fund's collecting, using and disclosing my/ our personal data for the purposes of processing my/ our donations, and any and all other ancillary administrative purposes associated with the donation.</p>		
<p>_____</p> <p>My/ Our Signature(s)/ Thumbprint(s)/ Company Stamp _____ <i>(For thumbprint(s), please go to the branch with your identification)</i> Date</p>		
PART 2: FOR SG ENABLE LTD'S COMPLETION		
Crediting Account Name: SG Enable Ltd – Mediacorp Enable Fund	Donor's Reference No.:	
Bank Swift Code: SCBLSG22XXX	Bank Account Number: 0105872563	
PART 3: FOR BANK'S/ FINANCIAL INSTITUTION'S COMPLETION		
<p>To: SG ENABLE LTD 20 Lengkok Bahru, #02-06, Enabling Village, Singapore 159053</p> <p>Attention: Finance Dept</p> <p>This application is REJECTED (please tick accordingly) for the following reason(s):</p> <p><input type="checkbox"/> *Signature/ Thumbprint differs from financial institution's record</p> <p><input type="checkbox"/> *Signature/ Thumbprint *incomplete/ unclear</p> <p><input type="checkbox"/> Account operated by *signature/ thumbprint</p> <p><input type="checkbox"/> Wrong account number</p> <p><input type="checkbox"/> Amendments not countersigned by customer</p> <p><input type="checkbox"/> Others: _____</p> <p><i>*Please delete where inapplicable</i></p>		
_____	_____	_____
Name of Approving Officer	Authorised Signature	Date