



香港公益金一般捐款計劃

The Community Chest of Hong Kong - General Donations

自動轉賬授權書 Direct Debit Authorization (請寄回正本 please send back the original)

本人現授權銀行於本人銀行賬戶內支付港幣_____元作為香港公益金的每月捐款。

I hereby authorize my bank to debit my bank account to make a monthly donation of HK\$_____ to The Community Chest of Hong Kong.

Name of Party to be Credited (The Beneficiary) 收款之一方(受益人)	Bank No. 銀行編號	Branch No. 分行編號	Account No. to be credited 收款賬戶之號碼
The Community Chest of Hong Kong 香港公益金	004	002	325363001

I/We hereby authorize my/our below named Bank to effect transfers from my/our account to The Community Chest of Hong Kong ("the Chest") in accordance with such instructions as my/our Bank may receive from the Chest and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated above. I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer or reversal notice has been given to me/us. I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s). I/We understand that I/we must maintain sufficient funds in the account one business day (before the close of branch banking hours) before the transfer date (as specified in the instructions received by my/our Bank from the Chest and/or its banker and/or its banker's correspondent from time to time) for the transfer authorized herein. I/We agree that should there be insufficient funds in my/our account to meet any transfer authorized herein, my/our Bank will be entitled, at its absolute discretion, not to effect such a transfer in which event the Bank may levy its usual charges and may cancel this authorization at any time without notification to my/us. For the avoidance of doubt, the Bank may cancel this authorization at its sole discretion at any time without prior notice. This direct debit authorization shall have effect until further notice. I/We agree that if no transaction is performed on my/our account under such authorization for a continuous period of 30 months, my/our Bank reserves the right to cancel the direct debit arrangement without prior notice to me/us, even though there is no expiry date for the authorization. I/We agree that any notice of cancellation or variation of this authorization which I/we may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect.

本人(等)現授權本人(等)的下述銀行及香港公益金("公益金"),(根據收款人或其往來銀行及/或代理人不時給予本人(等)銀行的指示)自本人(等)的戶口內轉賬予香港公益金。惟每次轉賬金額不得超過以上指定的限額。本人(等)同意本人(等)的銀行毋須證實該等轉賬通知或沖銷通知是否已交予本人(等)。如因該等轉賬而令本人(等)的戶口出現透支(或令現時的透支增加),本人(等)願共同及個別承擔全部責任。本人(等)明白本人(等)須在指定的轉賬日期(即根據本人(等)的銀行從公益金或其往來銀行/或代理人不時收到的指示)前一個營業日(分行辦公時間內),在戶口內備有足夠款項以便支付該等授權轉賬。本人(等)並同意如本人(等)的戶口並無足夠款項支付該等授權轉賬,本人(等)的銀行有絕對酌情權不予轉賬,且本人(等)的銀行可收取慣常的收費,並可隨時取消該等授權轉賬且毋須通知本人(等)。為避免疑問,本人(等)的銀行可隨時自行決定取消該等授權轉賬且毋須通知本人(等)。本直接付款授權書將繼續生效直至另行通知為止。本人(等)同意如本人(等)已設立的直接付款授權的戶口連續三十個月內未有根據本授權而作出過賬的紀錄,本人(等)的銀行保留權利取消本直接付款安排而毋須另行通知本人(等),即使本授權書未有註冊授權到期日。本人(等)同意,本人(等)取消或更改本授權書的任何通知,須於取消/更改生效日最少兩個工作天之前交予本人(等)的銀行。

為方便電腦處理,以下資料請以英文正楷填寫 **PLEASE PRINT**

My / Our Full Name (s) 本人/吾等之名稱 Mr / Miss / Mrs 先生/小姐/太太 Surname 姓 _____ First Name(s) 名 _____ 中文姓名 _____	Bank No. 銀行編號 _____	Branch No. 分行編號 _____	Account No. 本人/吾等之賬戶編號 _____
Bank Name 銀行名稱 _____	Branch Name 分行名稱 _____		
Monthly Limit (Donation) HK\$ 每月捐款港幣\$ _____	My / Our Full Address 本人/吾等之地址 _____ _____ _____		
Contact Telephone 聯絡電話 _____	Date of Completing Form 日期 _____		
For Office Use 由本會填寫 Debtor's Reference (Donor's Ref.) 債務人參考檔案編號 _____	For Bank Use _____		My / Our Signature(s) 本人/吾等之簽名 _____ Sign your name as recorded on statement / passbook 在結單/存摺上所記錄之簽名
Signature Verified 簽名式樣 _____			

凡捐款港幣一百元或以上,可獲發捐款收據。An official receipt will be issued for donation of HK\$100 or above.
為節省行政資源,每月捐款人士的總捐款額收據將於每年財政年度完結後寄發。
To minimize our administrative process, official receipt for the total contribution of monthly donor will be issued at the end of each fiscal year.

授權使用個人資料作推廣事宜

本人同意讓香港公益金(公益金)使用我的個人資料,透過以下不同通訊渠道通知本人公益金的各項籌款活動、定期通訊、義工服務及意見收集之用。

- 個人資料包括:姓名、電話號碼、傳真號碼、電郵地址、通訊地址等
- 使用的通訊渠道包括:郵遞、電郵、圖文傳真、電話及電話短訊等

本人不同意公益金使用本人的個人資料作上述用途。

請於適當方格內加上✓號以表示您的意願。

倘若日後您希望停止接收本會的宣傳推廣或最新資訊,您可隨時以書面或電郵要求本會停止使用您的個人資料作上述用途而無須繳付任何費用。詳情如下:

香港公益金
地址: 香港灣仔告士打道 39 號夏慤大廈 18 樓 1805 室
電話: 2599 6111 圖文傳真: 2506 1201 電郵: chest@commchest.org