



S.U.C.C.E.S.S. MULTI-LEVEL CARE SOCIETY

中僑護理服務協會



Simon K. Y. Lee Seniors Care Home Chieng's ADC Harmony House Austin Harris Residence Jackson Lam ADC

I (本人), Mr./Mrs/Ms. (先生/太太/小姐)

Date (日期): _____

donate a sum of (捐贈款項) \$ _____

Full Name (姓名) _____

to (與):

Simon K. Y. Lee Seniors Care Home	中僑李國賢護理安老院	<input type="checkbox"/>
Chieng's Adult Day Centre	錢梁秀容成人日間中心	<input type="checkbox"/>
Harmony House	樂群苑(輔助生活房屋)	<input type="checkbox"/>
Austin Harris Residence	樂福苑(輔助生活房屋)	<input type="checkbox"/>
Jackson Lam ADC	林植生成人日間中心	<input type="checkbox"/>

Designation 用途:

- Hereby designate the fund to be used for the benefit of the Society at the discretion of the Executive Director, Health Services. (此筆款項由健康服務行政總監全權負責, 為協會之福利而使用.)
- Other purpose (please list) 其他用途 (請列出): _____

Payment method (付款方法):

- Cash 現金 Cheque 支票
 Credit Card 信用卡: Visa/Master Card

Card Holder Name (持卡人姓名): _____

Card No. (信用卡號碼):

Expiry Date (有效日期):

/

Signature (簽名): _____

Do you require tax receipt (需要報稅收據)? Yes 需要 No 不需要

* Please put the following name on the receipt and send to the address below:

(請在報稅收據上填寫以下姓名及將收據寄往以下地址)

Name (姓名)	Mr./Mrs./Ms
Mailing Address (郵寄地址)	
Email Address (電郵)	
Phone # (電話)	

*Plaque for donation over \$2000 以上捐款可作命名紀念: Yes 需要 No 不需要

Name to be inscribed or honoured (請用以下名字作命名或刻名紀念):

Please complete the donation form and email to "mlcinfo@success.bc.ca" or mail to "SUCCESS Multi-Level Care Society, 555 Carrall Street, Vancouver, BC, V6B 2J8"