



DONATION FORM

I / We would like to make a donation to (please tick your choice):

- ☐ St. Andrew's Mission Hospital
☐ St. Andrew's Autism Centre
☐ St. Andrew's Community Hospital
☐ St. Andrew's Mission School
☐ St. Andrew's Migrant Worker Medical Centre
☐ St. Andrew's Nursing Home ☐ Aljunied / ☐ Buangkok / ☐ Henderson / ☐ Queenstown / ☐ Tampines North
☐ St. John's-St. Margaret's Nursing Home
☐ St. Andrew's Active Ageing Centre ☐ Bedok North / ☐ Bedok South / ☐ Dover
☐ St. Andrew's Senior Care ☐ Bedok North / ☐ Bedok South / ☐ Dover / ☐ Henderson / ☐ JOY Connect / ☐ Queenstown
☐ Tampines Central / ☐ Tampines North

DONATION AMOUNT (Minimum \$10 for e-receipt* and tax deduction.)

☐ \$50 ☐ \$100 ☐ \$500 ☐ \$1,000 ☐ Others: \$ _____

MODE OF DONATION (Please do not staple your cheque or enclose cash.)

Cheque:

Cheque No.: _____ (Please issue cheque payable to: **St. Andrew's Mission Hospital**)

Credit card (MasterCard/VISA/AMEX):

☐ One-time Donation ☐ Monthly Donation (Minimum \$10) from ____ / ____ (mm/yy) to ____ / ____ (mm/yy)

Credit Card No. _____ Expiry Date: ____ / ____ (mm/yy)

☐ Online via Giving.sg



www.giving.sg/st-andrew-s-mission-hospital

DONOR'S PARTICULARS

Name / Company Name: (Mr. / Mrs. / Miss / Ms. / Mdm. / Dr. / _____) _____

Full NRIC / FIN / UEN No.: _____ (*Required for tax deduction)

Address: _____ Postal Code: _____

Email (Required for e-receipts): _____ Contact No.: _____

St. Andrew's Mission Hospital (SAMH) is an Institution of a Public Character. Minimum \$10 donations are eligible for 2.5 times tax deduction. To qualify for tax deduction, please provide your full name / company name and NRIC/FIN/UEN number. Tax deduction will be automatically reflected in your annual tax assessment.

- ☐ Please tick the box if you wish to receive an e-receipt.* Monthly donors (minimum \$10) will receive an annual e-receipt.
☐ Please tick the box if you wish to receive e-updates from us.
☐ Please tick the box if you wish to be acknowledged in the online SAMH Annual Report.

Please mail the form to
Group Corporate Communications Department
St. Andrew's Mission Hospital, 10 Simei Street 3 Singapore 529897
or email samhsacs_comms@samh.org.sg
Thank you for your donation and support!

* In our efforts to go green, hard copy receipts will only be available upon request via email to samhsacs_comms@samh.org.sg. By submitting this donation form, you fully understand and agree to allow SAMH to use and disclose your personal data for the purposes of donation-processing as well as to send you updates of our organisation and fundraising-related activities, including fundraising updates, appeals and events, and the submission of donation data to the Inland Revenue Authority of Singapore (IRAS) for tax deduction purposes. SAMH aims to comply with the requirements of the Personal Data Protection Act 2012 and apply its obligations to our processes to safeguard your personal data. Please contact us at samhsacs_comms@samh.org.sg or 6586 8132 if you wish to opt out of our mailing list. For any enquiries or feedback relating to our data protection policies and practices, you may refer to our website (www.samh.org.sg) or write to our Data Protection Officer at samh_dpo@samh.org.sg or 10 Simei Street 3 Singapore 529897.

March 2025

Please glue here.

Please glue here.

Please do not glue here.

Please glue here.

1. Please print using the “double-sided” settings on 80gsm (or above) plain white paper.
2. Please fill up all the necessary information.
3. Before gluing, please fold the envelope along the dashed lines with the address facing the front.
4. Please glue all the areas stated “Please glue here,” so all sides and edges are completely sealed.
5. Please do not staple.
6. Please drop this sealed envelope into the post box.

Please glue here.

Step 1. Please fold along this line.

Postage will be
paid by
addressee. For
posting in
Singapore only.

BUSINESS REPLY SERVICE
PERMIT NO. 08521



St. Andrew's Mission Hospital
Singapore Anglican Community Services
Group Corporate Communications Department
10 Simei Street 3
Singapore 529897

Step 2. Please fold along this line.

(This side faces out.)