

BREAST CANCER WELFARE ASSOCIATION
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16 JALAN UTARA, 46200 PETALING JAYA, SELANGOR
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DONATION FORM

NAME/ COMPANY: _____
(FULL NAME, BLOCK LETTERS)

ADDRESS _____

TEL. NO.: _____ MOBILE: _____ FAX NO.: _____

EMAIL: _____

I enclose a donation of paid by:

Cheque No: _____
(made payable to Breast Cancer Welfare Association)

Direct Bank In: Maybank Account No. **5122 3158 7359**

*Tax exempt receipt will be issued only for donation RM100 above
Kindly fill in the form and fax/email/ mail it back to us for issuance of tax exempt receipt
together with your cheque or bank in slip.*

Breast Cancer Welfare Association thanks you for your generous contribution.