

# DONATION FORM

## BANKING DETAILS:

ACCOUNT NAME: ABRAHAM KRIEL BAMBANANI NPC  
BANK: ABSA  
ACCOUNT NO. 140 941 336  
BRANCH: 632005  
SWIFT ADDRESS: ABSAZAJJ  
REFERENCE: YOUR CELL NUMBER FOLLOWED BY #CM

## PERSONAL INFORMATION

Initials

Full Name & Surname

Gender

Male  Female  Other

ID / Passport Number

Tax Number

Email Address

Contact Number 1

Contact Number 2

Postal / Physical  
Address

## A MONTHLY CONTRIBUTION

I hereby pledge a monthly contribution of  R150  R500  R1000  R

Please choose an option by marking the appropriate box  Via debit card  Via scheduled EFT

## DEBIT ORDER INSTRUCTION

Please deduct R  on the  day of  20  and every month thereafter.

Account Holder

Account Number

Type of account

Cheque  Savings

Bank

 Branch code  Branch 

10% Annual increase authorised  Yes  No

## A ONCE-OFF CONTRIBUTION

I herewith pledge a once-off contribution of R

ACKNOWLEDGEMENT INFORMATION - YOUR SIGNATURE IS ESSENTIAL FOR THE TRANSACTION  
TO BE ACTIVATED

Signature

As per the Protection of Personal Information Act, 4 of 2013 POPI Act, Abraham Kriel Bambanani will not share, sell or distribute your personal information to any persons or entity.

Date