無國界醫生單次捐款表格

MEDECINS SANS FRONTIERES ONE-OFF DONATION FORM



我願意一次性捐款,支持無國界醫生救助更多生命。 I would like to make a one-off gift to support MSF's lifesaving work.



如果你是歐盟成員國的公民,又或現正居住於或身處於歐盟成員國,請到我們網站(msf.hk/eudonationform)下載另一份表格填寫。如果你不是以上 的情況, 請直接填寫以下表格。謝謝。

If you are an EU citizen, or if you are residing or currently located in an EU Member State, please go to our webpage (msf.hk/eudonationform) to download another form for submission. If you are not, please fill in the form below. Thank you.

捐款金額 DONATION AMOUNT





HK\$1,000



HK\$2,000



可為12名營養不良兒童提供一周的即食營 養治療食品。

can provide one week's treatment of ready-touse therapeutic food for 12 children.

可為60名流離失所者提供三個月基本藥物 及醫療物資。

can provide 3-month emergency health care to 60 displaced persons.

可為 833 名兒童注射麻疹疫苗, 防止致 命麻疹爆發。

can help MSF vaccinate 833 children against measles to prevent a deadly outbreak.

共他金額 Other amour		HK2								
捐款港幣一佰元或以上可扣減稅	說款。Donations o	f HK\$100 or ab	ove are tax deducti	ible.						
捐款者資料 DONOR	'S INFORM	IATION					ONLINE_	_00_2021		
捐款者編號 Donor Number	r (如適用 If app	licable) :					男M	女F		
英文姓名 Name in English	:				中文姓名 Name in Chinese:					
聯絡電話 Contact No.:				電郵	Email:					
地址 Address:										
	(室 Flat/Room)	(樓 FI	loor)	(座 Block/Tower)	(7	大廈 Building)				
						香港 HK / 力	九龍 KLN / 新界 N	NT		
	(屋苑/街道 Est	ate/Street)			(地區 District)					
出生日期 Date of Birth:		日D/	月M /	年Y	身份證號碼 ID No.:			()		
通訊語言 Preferred Language: 中文			如填寫可避免資料重複 Optional, for avoiding duplication of records							
無國界醫生對你個人私隱保障的承諾:我們絕不會出售或與任何公司/機構交換你的個人資料。你所提供的資料絕對保密,只會被無國界醫生(香港)及我們委託的服務提供者用作捐款處理、收據發送及與捐款相關的通訊用途。所有資料的使用均嚴格遵守我們不時更新的私隱聲明,詳列於我們的網站 https://msf.nk/ 為與你保持聯繫,我們可能會使用你的個人資料,向你提供無國界醫生救援工作的資訊及活動消息、發出籌款呼籲及收集意見。你可以隨時以郵寄方式或電郵至 unsubscribe@hongkong.msf.org,通知我們停止接收有關資訊。 我不願意收到上述有關無國界醫生的通訊及資料。										
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捐款方法 DONATION METHODS										
信用卡 BY CREDIT C	ARD Vis	sa Ma	sterCard	American Expres	SS					

信用卡 BY CREDIT CARD	Visa	MasterCard		American Expre	ss	
發卡銀行 Card Issuing Bank:						
信用卡號碼 Card No.:						
持卡人姓名 Cardholder's Name:						
信用卡有效日期 Card Expiry:		/	(月1	MM/年YY)	持卡人簽署 Cardholder's Signature:	

劃線支票 CROSSED CHEQUE

支票號碼 Cheque No.:

抬頭為「無國界醫生」。 請將劃線支票連同此表格交回 。 Please make the cheque payable to "Medecins Sans Frontieres" and send the crossed cheque with this form to us.

直接存入銀行戶口 BANK TRANSFER

請將捐款直接存入無國界醫生以下戶口,並將存款收據正本連同此表格寄回。

Please make a direct deposit to the MSF bank account. Please send the original bank transfer receipt with this form to us.

滙豐銀行 HSBC 002-4-398224 或or 中國銀行 Bank of China 012-566-0-000777-1

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請開啓PayMe / 支付寶香港 / 八達通銀包流動電話程式,掃描二維碼(QR Code)進行捐款。 完成捐款後請把交易記錄截圖電郵至donation@hongkong.msf.org,並提供姓名、電話及通訊地址。如使用PayMe進行捐款,請於確認付款前在訊息欄提供姓名、電話及通訊地址。 Please scan the QR code in your PayMe / AlipayHK / Octopus Wallet mobile app to make a

donation. Please send a screen capture of the transaction to donation@hongkong.msf.org and provide your name, phone no. and mailing address. If you donate via PayMe, please provide your name, phone no. and mailing address in the message box before you complete the transaction.

便利店 Convenience store

請攜同右方捐款條碼到全港任何一間7-Eleven、Circle K、VanGO便利店、華潤萬家超級市場或U購select以現金捐款。完成捐款後 請將收據連同本表格寄回 。

You can make a cash donation to us at any 7-Eleven, Circle K, VanGO convenience store, the China Resources Vanguard Supermarket or U Select in Hong Kong by presenting the donation barcode on the right. Please send the original receipt with this form to us.



感謝您的慷慨捐助! Thank you for your generosity!

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MEDECINS SANS FRONTIERES

22/F, PACIFIC PLAZA 410-418 DES VOEUX ROAD WEST SAI WAN, HONG KONG

Kon can help us save lives.

