

CHARITY GALA DINNER 17 October 2025 (Friday), 6.00 pm at The Fullerton Hotel Singapore

RESPONSE FORM

| \bigcirc I / We wish to I | book seats/table(s) at: | | |
|---|---|----------------------------------|------------------------------------|
| □ \$1,000 per | seat | le 🛛 \$10,000 per table | □ \$15,000 per table |
| Note: Each table seats 10 persons. | | | |
| Dietary prefe | ence: | | |
| Chinese | Halal | Vegetarian | Allergies: |
| I / We wish to make an outright cash donation to support the work of St. Andrew's Mission Hospital (SAMH) and Singapore Anglican Community Services (SACS). | | | |
| □ \$500 | □ \$1,000 | □ \$2,000 | Others: |
| Note: All donations towards the event will be shared equally between SAMH and SACS. Minimum \$10 for e-receipt and tax deduction. | | | |
| MODE OF PAYMENT | | | |
| Cheque Cheque No.: | | | |
| | (Please issue chec on the reverse side | | ital and indicate "Charity Dinner" |
| O Credit Card | Credit Card No.: | | Expiry Date: |
| MasterCard / V | isa / AMEX | | / (mm/yy) |
| ⊖ Giving.sg | ET-L'ANDET | ○ PayNow | 259401 004E57 Ver 01.0011 |
| bit.ly/cgd202 | | UEN: T08CC3017C002 | ST ANDREW'S MISSION HOSPI |
| | | Please input CGD2025 and your | |
| | | full NRIC (for tax deduction) in | |
| | 前级得职行 | the comments/reference field. | |
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| | | | SCAN TO PAY |
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| DONOR'S PARTICULARS | | | |
| Name / Company Name: (Mr / Mrs / Miss / Ms / Mdm / Dr /) | | | |
| | | | |
| Full NRIC / FIN / UEN No.: | | | |
| | ddress: Postal Code: | | |
| Email: Contact No.: | | | |
| ○ Yes, I wish to receive a receipt / e-receipt. | | | |

• Yes, I wish to be acknowledged for my donation in the online annual report.

 $\odot~$ Yes, I wish to receive e-updates from SAMH and SACS.

Please mail the completed form to St. Andrew's Mission Hospital Singapore Anglican Community Services Group Corporate Communications Department 10 Simei Street 3 Singapore 529897 or email samhsacs_comms@samh.org.sg

For more information, please visit bit.ly/samhsacs-cgd2025 or call 6586 1999

All 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 for auto-inclusion in your tax assessment. SAMH and SACS comply with the Personal Data Protection Act 2012. By submitting this response form, you consent to SAMH's and SACS's use and disclosure of your personal data for the purposes of donation processing, as well as fundraising related activities, and the submission of donation data to the Inland Revenue Authority of Singapore (IRAS) for tax deduction purposes.