

Today's date: _____/_____/_____



PLEDGE FORM

CFC ANCOP Australia Ltd ABN 61 099 188 244

Solicited by: _____

(Name/State of ANCOP Ambassador)
Leave blank if not applicable

Section A: Giving Preferences (tick relevant box)

- One-off payment of:
- \$360 (can support the education of a primary/secondary student for a year)
 - \$750 (can support the education of a tertiary/vocational student for a year)
 - \$4,500 (for resettlement of families affected by disasters, incl. building houses)
 - Other amount: \$ _____ (to support the above and/or other ANCOP work)

----- OR -----

- Regular payment of \$ _____ to be paid: weekly fortnightly monthly annually

I understand my regular payment may be changed or cancelled at my option, by writing to info@cfcancop.org.au

Preferred Start Date: ____ / ____ / 20 ____ or Give Now

Section B: Giver's Details

Name: _____ Email: _____

Address: _____ Phone: _____

CFC ANCOP Australia follows the Australian Privacy Principles and keeps donor information private. Donation receipts will be issued to the person named above, at the end of the financial year. If required earlier, write to info@cfcancop.org.au. Donations over \$2 are tax deductible.

Section C: Payment Method

- Method 1: **Cash Deposit, or Direct Deposit Transfer from your account**, to below bank accounts. To assist our records, include in your Deposit Reference Code the following info: the initial of your first name plus your full surname, your State or Territory, and the surname of the ANCOP Ambassador who solicited this pledge form. For example: for a donor named John Doe of NSW, whose pledge is solicited by the ANCOP Ambassador John Citizen, the deposit reference code should be "JDoe_NSW_Citizen".
- For residents of Victoria (State fundraising compliance condition):
"CFC ANCOP Australia Ltd" ♦ BSB 063-777 ♦ Account 10253547
 - For residents of all other states and territories and areas outside of Australia:
"CFC ANCOP Australia Ltd" ♦ BSB 062-121 ♦ Account 10692444
- Method 2: **PayPal** via 'Giving or Donate' link. Go to www.cfcancop.org.au
- Method 3: **Credit Card Authorisation** (fill in Section D below).
Kindly provide us with a new pledge form, with the updated credit card details, if there's a change in your credit card in the future.

Section D: Authorisation and commitment (tick relevant box)

Please charge my Mastercard or Visa card per my **Giving Preferences** in **Section A** (above).

I understand that the regular payment ticked in Section A will be ongoing, but I have the option to change the amount or to cancel at anytime, by writing to info@cfcancop.org.au

Credit Card No. _____ - _____ - _____ - _____ **Expiry:** ____ / ____

Name on Card: _____ **Signature:** x _____