

SOCIETY OF JESUS, CHINESE PROVINCE

Credit Card Donation Form

Date of Registration: ___Date___Month_____Year

Donor's information

Name: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Date of Birth: ___Date___Month_____Year
E-Mail:	
Daytime Contact No.:	Mobile:

Donation project

Purpose:

A. **General giving** (Not for special purposes, as a charity and missionary for the Jesuits)

B. **Thanks giving**: 1. Elder Jesuits care 2. Jesuits Formation 3. Vocation advance

C. **Love giving**: 1. Youth Ministry 2. Social Services 3. Spiritual Accompany

D. **Others**: 1. Taipei Ignatian Spirituality Center 2. Magis Youth Center

3. Guting Sacred Heart Church 4. Tainan Sacred Heart Church

5. Holy Family Church Taipei 6. Manresa Spirituality Center

7. FU JEN FACULTY OF THEOLOGY OF ST. ROBERT BELLARMINE

8. Rerum Novarum Center

<input type="checkbox"/> Monthly donation Amount per month: _____ TWD From the day: _____ to _____	<input type="checkbox"/> One-off donation amount: _____ TWD
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Receipt title : <input type="checkbox"/> Same as the donor	<input type="checkbox"/> Send one receipt for each offering
Tax ID no./ ID no. :	<input type="checkbox"/> Send the receipt for one year
	<input type="checkbox"/> No required

Address:

Credit-card donation information

Name of credit card holder: <input type="checkbox"/> Same as the donor	Signature of cardholder: (Signature should correspond to specimen signature of credit card account.)
ID no. of cardholder:	
Date of Birth: ___Date___Month_____Year <input type="checkbox"/> Same as the donor	Issuing bank:

Credit card account no. : _____ (VISA MASTER JCB)

Card expiry date: ___MM/____YY	Merchant No. : 0 1 6 9 0 0 0 2 9
	Auth. Code: (Cardholder does not fill this out.)

Please check following questions to help us provide the best service. (Optional)

Educational background: <input type="checkbox"/> Primary or below <input type="checkbox"/> Lower Secondary <input type="checkbox"/> Secondary School <input type="checkbox"/> Undergraduate/College <input type="checkbox"/> Graduate	Religion: <input type="checkbox"/> Catholicism <input type="checkbox"/> Christianity <input type="checkbox"/> Buddhism <input type="checkbox"/> Other religions _____
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Occupation:

- Clergy Military personnel, Civil servants and Teachers Manufacturing financial sector
IT Student Service industry Agricultural, Forestry, Fishery and Animal Husbandry
Housekeeper Others

Information source: Parish: _____ DM esuits Internet

Social media Event Relatives/Friends Others _____

Friendly notice

1. Please fill out this form completely for enquiry and contact. Then fax it to (02) 2321-5551, and call us at (02) 2321-2442 ext. 507, 510 for check. Or mail to: 106 Development Office, No.26, Lane 183, Sec. 1, Heping E. Rd., Da'an Dist., Taipei City.
2. For the donor who scribe to Jesuits, the deduction date is the first day of each month. In case of holidays, it will be postponed to the next business day. And if you want to cancel or change the sponsorship authorization, please fill out the form 10 days before the operating day to inform us.
3. The official receipt will be sent in 4-6 weeks after the deduction.
4. If your credit card is reported lost, disabled, changed or upgraded, please call after the new card is received to deal with the following work.
5. Conform to *Personal Information Protection Act*(2015), the information filled out by the user is only for contacting, and to ensure that they are used for other purposes.