**Albert Schweitzer Familienwerk Foundation Philippines, Inc. (ASFFPI)**

**MAKE A DONATION**

Yes, I / We Mr. /Mrs. / Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ want to support Albert Schweitzer Familienwerk Foundation Philippines, Inc.

Name of Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I want to make a financial donation of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I want to sponsor \_\_\_\_\_ child / children for his / her/their education, medical/health and sports needs for \_\_\_\_ year (s) P \_\_\_\_\_\_\_ per month/quarter or year

( Please fill in the amount and the number of years and the frequency )

Account name : Albert Schweitzer Familienwerk Foundation Philippines, Inc.

Bank Account : Union Bank, Mango Ave., Cebu City

Checking Account number : 502-030-001-598

Contact us:

Mrs. Ligaya V. Maquiling, R.S.W.

Deputy Executive Director, Social Worker

Cell no. 0923-744-5329

Mrs. Martininana D. Mercado,R.S.W

Executive Director

0917-726-7608/ 0928-403-8695