



HUMANITY WELFARE COUNCIL

Postal Address – B-1, 638A, 2nd Floor, Janakpuri, New Delhi-110058

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HUMANITY WELFARE COUNCIL

“ To Grow and Expand ”

DONATION FORM

Form No. : HWC-IN181001-500

Note:

- 1. The application form is to be filled in CAPITAL LETTERS only.
- 2. Self Attested Copy of Address Proof and Photo Id Proof.

DONOR DETAILS :

Donor Name :

Date of Birth : / / PAN : NATIONALITY :
(DD/ MM/ YYYY)

Occupation :

Residential/ Office Address :

CITY : STATE :

PIN CODE: MOBILE/ LANDLINE :

E-MAIL :

DONATION DETAILS :

Cheque/ Bank Draft : In favour of “ HUMANITY WELFARE COUNCIL ” Payable at NEW DELHI

Cheque/Bank Draft No. :

Amount ₹

Amount (In Words) :

Reciept No. :

Date : / /
(DD/ MM/ YYYY)

Any Further Information (If Required)

Please Provide Two References:

- | | | |
|---------|--------|--------------|
| 1. Name | Mobile | Relationship |
| 2. Name | Mobile | Relationship |

Date :

Signature :