

## AWAAZ FOUNDATION

## **Charity Donation Form**

Please complete all sections of this form. If you wish to donate anonymously please make your donation by cash or bank cheque and leave the 'Contact information' section blank.

Your donation will help fund our organization's medical research projects. Thank you for your generous support!

Contact Info	ormation					
Full Name	Company (if any)					
Address						
City			State		Post code	
Phone No:						
<b>Donation</b>	Amount(Plo	ease Specify	your curren	cy here):		
25	50	100	350	1000	Other amount	
Cheque No:	:					
Signature: -						

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