



FLINDERS OVERSEAS HEALTH GROUP
DONATION FORM

Once you have made your donation by electing from the alternatives below , please then fill out this form and send it directly to

Either

Email :- foundation@health.sa.gov.au & c c to fohg@bigpond.com

Or post to

Flinders Medical Foundation , Flinders Drive, Bedford Park S A 5042

& c c to Fohg , P O Box 280 , Hahndorf . S A 5245

Donor Information

Surname Other names.....

Address:

.....

Suburb: State:..... Postcode:

Telephone (home): Telephone (work):

Fax: Mobile:

Email:

Donation Information

I wish to donate a total of \$.....to the Flinders Overseas Health Group

I would like to make this donation in the form of (please highlight)

Cash / Cheque / Money Order / Card / Direct Deposit

Bankcard Visa Mastercard Diners AMEX

 Expiry Date: /

Name on Card:

FMC Foundation bank details

Bank SA

BSB: 105-143

Account Number: 023-905-140

Date of Deposit:...../...../20..... Donors name or Reference used:.....

Inspired partnerships for LIFE. Prevent. Cure. Care.

Flinders Medical Centre Foundation, Flinders Drive, Bedford Park SA 5042
ph. 08 8204 5216, fax 08 8204 5596, foundation@health.sa.gov.au