



City Level Programme of Action (CLPOA for Street And Working Children)

Donation Form

Please take a print out of this form and send it to:

City Level Programme of Action for Street & Working Children,
Kolkata Municipal Corporation Building, First Floor, Room # 147,
5, S.N. Banerjee Road, Kolkata 700 013

Your Contact Details

Title: Mr./Mrs./Ms./Other _____ First Name _____ Surname _____

Address _____

Postal Code _____ Tel no: _____ Fax no: _____ E-mail: _____

I would like to become a regular donor and donate INR _____ or US\$ _____ each month.

(In words) _____

I would like to make a one-time donation of INR _____ or US\$ _____

(In words) _____

Your Preference

Please indicate which Project Field(s) you are most interested in donating to:

Education

Health

Child Rights / Protection

Awareness

Advocacy

Signature of Donor

I have enclosed: Cheque/ Demand Draft / NEFT/ RTGS receipt

Please do not send cash through the post.

Original Money Receipt will be sent through post to your above mentioned address

Our Bank Details:

Bank of Baroda, Garia Station Road Branch, Kolkata 700 084

Account No: 37250100001521

IFSC Code : BARB0STAGAR

we value your patronage and support