



UBOMI
CHARITABLE TRUST

God
we cares..
care...!
people matter!

AUTHORISATION

credit card payment

CARD TYPE: VISA MASTERCARD

Name as it appears on the card: _____

Card Number:

Expiry Date: / Last 3 digits at the back of the card:

TO UBOMI CHARITABLE TRUST FOR THE AMOUNT OF:

R _____

Sign _____ Date _____

Please send this completed form to info@ubomi.com or fax it to (+27)21 434 3477

UBOMI CHARITABLE TRUST
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Cape Town, 8006 South Africa
Email: info@ubomi.com | Web: www.ubomi.com
Standard Bank, Account Number: 07105 651, Branch Code: 024009, International Branch Code: 051001