



FAX:03-5405-1814

# Fund for Health Care Workers by Public officials Donation Application Form

I donate ¥ \_\_\_\_\_ to the Public Interest Promoting Association.

With this donation, we would like to deliver masks and medical equipment that are difficult to be provided to medical staff.

Please help people who are fighting COVID-19 in the medical field.

Date: \_\_\_\_\_

Tatsuya Fukushima, Representative director of Public Interest Promoting Association

I will donate to establish the fund. In accordance with the handling rules for donations, I will admit the deduction of prescribed corporate operating expenses (donations to corporate accounting).

(Furigana) Your name or your company's name	
Your address (Registered address)	(〒      —      )
Your phone number	
Work place (Civil servants must write it down)	

◆Delivery (transfer) scheduled date: \_\_\_\_\_

◆Delivery method  Bank transfer

Sumitomo Mitsui Banking Corporation Akasaka Branch (825)

Normal 9404422

Account name ザイ) コウエクスイシンキョウカイ

Postal Transfer: 00180-8-513089 Public Interest Promoting Association

PayPal: souken@iva.jp

Cash handover

\*(Reception date: \_\_\_\_\_ )

## Public Interest Promoting Association

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