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**Kawempe Home Care Donation Form**

***(To complete this form please “ save” it in your documents file and then complete the information and again ”save” it and post or email it to*** [***sguma@kawempehomecare.org***](mailto:sguma@kawempehomecare.org)

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| --- | --- | --- |
| **Last Name:** | Click here to enter text. | |
| **First Name:** | Click here to enter text. | |
| **Organisation:**  **(if applicable)** | Click here to enter text. | |
| **Address:** | Click here to enter text. | |
| **City/ Town:** | Click here to enter text. | **State/ Provence**  Click here to enter text. |
| **Postcode/ Zip code** | Click here to enter text. **Country:** Click here to enter text. | |
| **Email Address:** | Click here to enter text. | |

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| **Payment Method:**  International Money Order  Bank Cheque  Bank Transfer  I would like my donation to be used for:  Kawempe Home Care – New Home  Other Click here to enter text. | |
| **Currency:** Click here to enter text. **Amount Donated:** Click here to enter text.  **SIGNATURE: DATE:** Click here to enter text.   |  |  | | --- | --- | | **Kawempe Home Care Bank Details:**  **Name of Bank:**  DFCU Bank Uganda Limited  Swift Code: DFCUUGKA  Branch: DFCU Towers  **Address of Bank:**  Plot 26, Kyadondo Road  Nakasero. Uganda.  **Mail address:** P.O. Box 70, Kampala Uganda  **Account Number: 02173573407082**  **Beneficiary Name: Kawempe Home Care**  P.O.Box 337 Kampala, Uganda  **Street Address:** Erisa Zone, Kyebando, along Gayaza Road, Kawempe Division, Kampala, Uganda. | **Bank Cheque /Money Order:**  **Payee: Kawempe Home Care**  **Send registered mail to**:  Kawempe Home Care  P.O. Box 337  Kampala, Uganda | |  |