

Donations

PLEASE PRINT CLEARLY (*Enclose the appropriate fee*)

Send to: Donations
NSW Stoma Limited
PO Box 164
Camperdown NSW 1450

Enclosed is a donation of: \$ _____

Please forward receipt to:

Name _____

Street _____

City / Town _____

Post Code _____

Please send your donation to our office with the above form completed and a receipt will be issued. Cheques should be made out to the NSW Stoma Limited. Rest assured that your name will remain confidential.

Many thanks to members you have already sent in donations to help with our expenses. Please keep them coming.

Remember names will not be acknowledged unless requested. Pensioner member.