Donation Form

DD

YYYY

MM

 **Date:** 　 / /

**Amount of donation: JPY**

\*Please remit your donation in Japanese yen.

|  |  |
| --- | --- |
| **Name of company/****organization** |  |
| **Address** | Postcode: Country: |
| **Representative** |  First name 　　　　　 Middle name 　　　　　　 Last nameMs./Mrs./Miss./Mr./Dr.  |
| Corporate title:  |
| **Contact person** |  First name 　　　　　 Middle name 　　　　　　 Last nameMs./Mrs./Miss./Mr./Dr.  |
| Corporate title:  |
| Phone number: （Country code ）-  |
| E-mail address:  |

**Please check the box if applicable.**

**❏** We need billing statement.

**❏** We prefer to make our donation anonymously.

Japanese Foundation for Cancer Research (JFCR) lists the names of donors on the bulletin board at the outpatient floor for one year, and on official website. For companies that donate \500,000 or more, JFCR creates the donor’s nameplates to honor them and displays plates at the outpatient floor of the hospital.