


We invite you to share your ideas and support our Trust; your support is welcomed!
Please return this form to us via email projects@abangafrica.com or via FAX +27 (0)21 4261336

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| <p align="center">Abang Africa Trust No: IT 9139/06 P.O. Box 15909 Vlaeberg 8018 Cape Town / South Africa Tel: + 27 (0) 21 426 1330/1334 Fax: + 27 (0) 21 426 1336 E-mail: projects@abangafrica.com I: www.abangafrica.org</p> | <p>ABANG means to SHARE in local Sotho-language. ABANG AFRICA TRUST, a not for profit organisation, has been set up to coordinate the volunteering work, provide support and handle donations for the projects. We relay the feedback and ideas to the project leaders with the aim of improving the tours and the projects as a whole.</p> |
| <p>Project Name:</p> <p>Project Contact:</p> <p>Supporter Name:</p> <p>Abang Africa Contact:</p> <p>Travel / Visit / Volunteer Date:</p> |  |

Please let us know if you have any remarks or suggestion related to the project so we can optimize our goal; to work together with the people of Africa and to make each other stronger.

Project Remarks:

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Project Suggestions:

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| | |
|----------------------------|------------|
| Total per Project | ZAR |
| Total per Project | ZAR |
| Total Support Trust | |

| | |
|----------------------------------|------------|
| Total for Project / Trust | ZAR |
|----------------------------------|------------|

Payments and donations for support towards ABANG AFRICA TRUST can be made in ZAR to the following account:

NAME OF THE BANK : **STANDARD BANK OF SOUTH AFRICA**
BRANCH : **CONSTANTIA**
ADDRESS : **Shop 23A, Constantia Courtyard, Main Road, Constantia**
BRANCH CODE : **025309 (17)**
SWIFT NUMBER (BIC Code): **SBZAJJ (only applicable to clients paying from outside South Africa)**
ACCOUNT HOLDER : **ABANG AFRICA TRUST**
ACCOUNT NUMBER : **27158 514 5**

LETTER OF CREDIT CARD AUTHORIZATION

Please fax to Fax: +27 (0) 21 426 1336 or email : info@abangafrica.com

CARDHOLDER DETAILS

NAME :
ADDRESS :
COUNTRY :
TELEPHONE :
FAX :
E-MAIL (work) :
E-MAIL (private) :

DATE :

Dear Sir or Madam :

I hereby authorise payment for the following booking(s) made with African Ample Assistance (AAA) on behalf *Abang Africa Trust*.

Project :
Amount :

Kindly find below my details which AAA on behalf *Abang Africa Trust* needs in order to process the credit card payment for me (Mastercard, Visa and American express are accepted)

Card number : _____ (*16 numbers on front of card*)
cvc number : _____ (*last 3 digits on back of card*)
Expiry date of the card : _____ (*valid thru : mm/yy*)
Date of birth : _____ (*of cardholder*)
Passport number : _____ (*of cardholder*)
Country of residence : _____ (*of cardholder*)
Physical address : _____ (*of cardholder*)
Name of bank : _____ (*who issued the credit card*)
Mothers' maiden name : _____ (*of cardholder, requested for cross reference to exclude fraud*)

Trusting the above details are used for the sole use of the payment of the above mentioned booking, I remain

Yours faithfully,

Signature &date