Remittance Form



Direct deposit

Deposit funds at any Commonwealth Bank into the account below:

Bank: Commonwealth Bank **Account Name:** SCHF – Westmead **BSB:** 062 230 **Account Number:** 11331137

Complete all details below and return by fax to **Bronwen Simmons** on **(02) 9976 8303** or email bronwen.simmons@health.nsw.gov.au

or

Cheque payment

- 1. All cheques are to be made payable to **Bear Cottage**
- 2. Send the cheque, together with the completed remittance form to:

Bear Cottage 2 Fairy Bower Road Manly NSW 2095

Contact details

Title:	First Name:	Surname:	
Position:			
School Name:			
Postal Address:			
Phone:	Fax:	Email:	
Total amount deposited: \$			
Date deposited:	Brar	Branch where deposited:	
from Bear Cottage or S	ou do not wish to receive ydney Children's Hosptials	•	
Receipting options: Please indicate how you	would like this contribut	tion receipted: School Personal	

Thank you so much for your contribution!

Superhero Week 26 July to 1 August 2020 superheroweek.com.au



Sydney Children's Hospitals Foundation

