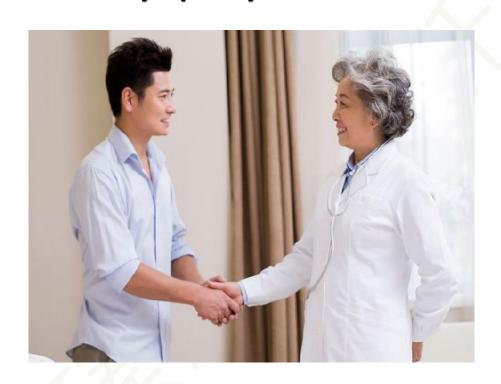
柏臻慈善信託 Cypress Charitable Trust 你的慢淋慈善機構 YOUR CLL Charity

慢性淋巴細胞白血病即時支援 **Chronic Lymphocytic Leukemia CLL Aid**



慢性淋巴細胞白血病即時支援 申請資格

- (1) 持有有效香港身份證,及
- (2)確診慢性淋巴細胞白血病 (又稱 CLL),無論正在接受積極治療,觀察等待治療狀態,計劃開始治療或接受治療後護理,都符合申請資格,申請人需要由香港註冊血液及血液腫瘤科專科醫生填寫慢性淋巴細胞白血病即時支援申請表並簽署。
- (3) 出示醫療記錄或其他文件副本,顯示申請人確診 CLL 部分,例如測試報告、醫生證明書或藥單。

港幣 2,000 元的即時現金支援在受託人委任註冊會計師聯同受託人(或受託人代表)見證下,以記名支票予以發放符合條件的合資格申請人或其授權人士, 申請人無需經過資產審查。 <u>柏臻慈善信託</u>不保證接納任何遞交的申請,並保留修改以上條款和任何爭議的最終決定權,恕不接受重複申請。

準備好已填妥申請表及以上所需文件後,請與慢性淋巴細胞白血病即時支援聯絡:

聯絡電話: 2560-9985 (逢星期一至五 上午10時至下午2時)或

請點擊填寫→網站聯絡表格 (建議採用)或掃描頁底二維碼

Eligibility for Chronic Lymphocytic Leukemia CLL Aid

- (1) Be a valid Hong Kong ID card holder; and
- (2) Have a confirmed diagnosis of Chronic Lymphocytic Leukemia ("CLL") being in active treatment, in watch and wait situation, or in follow up care signed by a Hong Kong Registered Haematology and Haematological oncology specialist on our "Chronic Lymphocytic Leukemia CLL Aid Application Form".
- (3) Present photocopies of a portion of medical record or other documentation that shows the diagnosis of CLL e.g., test report, medical certificate or prescription.

The instant cash worth of HK\$2,000 will be distributed by order cheque in the presence of trustee appointed Certified Public Account, together with trustee - or trustee's representative - to the eligible applicant, or the applicant's authorised representative.

No financial assessment is needed. Cypress Charitable Trust does not guarantee acceptance to applications and reserves the rights of amendments to the terms and conditions as well as its final decisions in case of any disputes. No repeated applicant is acceptable.

Gather the above required information and contact "Chronic Lymphocytic Leukemia CLL Aid" By Phone: 2560-9985 (Every Monday to Friday 10am − 2pm); or Please Click & Complete → Website Contact Form (Preferred Use) or Scan QR code below



申請清單 Checklist for Application

□ 醫生簽署之 <u>慢性淋巴細胞白血病即時支援申請表</u> 正本 Original copy of doctor signed "Chronic Lymphocytic Leukemia CLL Aid Application Form
□ 醫療記錄或其他文件副本顯示確診慢性淋巴細胞白血病 (CLL)部分 Photocopies of a portion of medical record or other documentation that shows the diagnosis of Chronic Lymphocytic Leukemia ("CLL")
□ 申請人之有效香港身份證副本 Photocopy of the applicant's valid Hong Kong Identity Card
Cypress Charitable Trust 慢性淋巴細胞白血病即時支援 申請表 Chronic Lymphocytic Leukemia CLL Aid Application Form
由主診醫生填寫 To be completed by attending doctor
申請日期 Date of Application 申請人姓名 Name of Applicant
申請人聯絡資料 Applicant's contact details
Medical conditions 醫療狀況: Please tick 剔選v 觀察等待治療 Watch & wait 慢性淋巴細胞白血病 (CLL) 積極治療 Active treatment
主診醫生姓名及資歷 Name of Attending Doctor (with qualifications) BY A With a series of Attending Doctor (with qualifications) BY A With a series of Attending Doctor (with qualifications) BY A With a series of Attending Doctor (with qualifications) BY A With a series of Attending Doctor (with qualifications) BY A With a series of Attending Doctor (with qualifications) BY A WITH A SERIES OF ATTENDED TO THE S
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