

Please Print Clearly. Have questions? Please call 1-800-665-1868

1) My Info

Bri MacBain	Areas of Greatest Need - 407	
Name of Participant you are supporting	Location	Constituent ID - Fundraiser Page ID

OIndividual O Organization

If from organization, use First & Last Name for the contact person. Receipt will be issued in organization name, and sent to the contact's attention.

First Name*	MI*.	Last Name*	
Organization			
Suite/apt. No Street*			
City *	Pro	v/State*	Postal Code/ZIP *
Phone (REQUIRED)*	E-mail Addr	ess* (REQUIRED FOI	R E-RECEIPT)

2) Gift details

onor name (same as above)
nonymous
ame for Recognition:

3) Payment

 Cheque or Money order Please make payable to <u>B</u> 	<u>C SPCA</u> - Attn: Champions for Animals 1245 East 7th Ave Vancouver, BC, V5T 1R1 Or mail to your local branch.	Please do not send cash.
 Credit Card [] VISA [] Mastercard [] AMEX 	Card Number	Expiry Date
	Cardholder Name	сус
Signature:	Date:	

On behalf of the animals, thank you for supporting the BC SPCA.

For Internal Use Only:		
Fund	RE Batch Number	

- All donations will be credited in Canadian dollars.
- All donations are 100% tax receiptable, and are non-refundable and non-transferable.
- Donations of \$10 or more will automatically receive a tax receipt.
- The BC SPCA does not sell, rent, trade or otherwise share the names of our supporters.