

1) My Info

| | | |
|--|------------------------|-------------------------------------|
| Brenner Robb-Popadiuk | Areas of Greatest Need | 425 - 450 |
| Name of Participant you are supporting | Location | Constituent ID - Fundraiser Page ID |

Individual 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 * | Prov/State* | Postal Code/ZIP * |
| Phone (REQUIRED)* | | |
| E-mail Address* (REQUIRED FOR E-RECEIPT) | | |

2) Gift details

| |
|-----------------|
| Amount \$ _____ |
|-----------------|

How would you like to be recognized online?

- Donor name (same as above)
- Anonymous
- Name for Recognition: _____

3) Payment

| | | | | | | | | | |
|---|--|--|--|-------------|-------------|--|--|-----------------|-----|
| <input type="radio"/> Cheque or Money order Please make payable to <u>BC 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. | | | | | | | | |
| <input type="radio"/> Credit Card <input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> AMEX | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 70%;"></td> <td style="border-bottom: 1px solid black; width: 30%;"></td> </tr> <tr> <td style="font-size: small;">Card Number</td> <td style="font-size: small;">Expiry Date</td> </tr> <tr> <td style="border-bottom: 1px solid black; width: 70%;"></td> <td style="border-bottom: 1px solid black; width: 30%;"></td> </tr> <tr> <td style="font-size: small;">Cardholder Name</td> <td style="font-size: small;">CVC</td> </tr> </table> | | | Card Number | Expiry Date | | | Cardholder Name | CVC |
| | | | | | | | | | |
| Card Number | Expiry Date | | | | | | | | |
| | | | | | | | | | |
| Cardholder Name | CVC | | | | | | | | |
| Signature: _____ Date: _____ | | | | | | | | | |

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

| | |
|--|---|
| For Internal Use Only: | |
| <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> Fund | <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> 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.