

For Internal Use Only:

RE Batch Number

Fund

## **Pledge Form**

Please Print Clearly. Have questions? Please call 1-855-622-7722.

## 1) My info

Name of Participant Being Supported	ag <b>Aılea</b> tıl An	imal Centre Location		ls - 48 uent ID - Fundraiser Pa	nge ID
Name of Farneipain Being Supported	7.11	mar cerme Locanor		Tanaraiser r	- Ige 1D
Individual  Organization					
from organization, use First & Last Nai nt to the contact's attention	ne for the c	ontact person. Rece	ipt will be issued i	n organization name,	and
First Name*	MI.	. Last Name*			
Organization*					
Suite/apt. No Street*					
City *		Prov/State*	Postal Cod	de/ZIP*	
Phone (REQUIRED)*	E-mo	ail Address* (REQI	JIRED FOR E-RE	CEIPT)	
Payment On behalf o	of the an		r Recognition: _ /ou for supp	orting the BC S	SPC/
○ Cheque or Money order	-				
Payable to BC SPCA When can we expect it?					
•					
When can we expect it?  O Cash	Card Number			Expiry Date	

• All donations will be credited in Canadian dollars.

non-transferable.

our supporters

 $\bullet \;\;$  All donations are 100% tax receiptable, and are non-refundable and

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