

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	Anim	nal Centre Location	Constituent	- 39 ID - Fundraiser Page I
Individual 🗌 Organization				
from organization, use First & Last Na ent to the contact's attention	me for the cor	ntact person. Receipt w	rill be issued in org	ganization name, and
First Name*	MI.	Last Name*		
Organization*		1		
Suite/apt. No Street*				
City*		Prov/State*	Postal Code/ZIF)*
Phone (REQUIRED)*	E-mail	 Address* (REQUIRE	D FOR E-RECEI	PT)
Amount \$		Donor nameAnonymous	(same as above)	
) Payment On behalf o		O Donor name O Anonymous O Name for Red	cognition:	ing the BC SPC
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On behalf of the control of the cont		AnonymousName for Red	cognition:	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