

For Internal Use Only:

RE Batch Number

Fund

Pledge Form

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

1) My info

Add an an Mark	Alchertafond Leannin	2005 - 358
Adrianne Virata Name of Participant Roing Supported	Animal Centre Location	<u> </u>
Name of Participant Being Supported	Animal Centre Location	Constituent ID - Fundraiser Page IE
Individual Organization		
from organization, use First & Last Nament to the contact's attention	ne for the contact person. Receipt w	ill be issued in organization name, and
First Name*	MI. Last Name*	
Organization*		
Suite/apt. No Street*		
City*	Prov/State*	Postal Code/ZIP*
Phone (REQUIRED)*	E-mail Address* (REQUIRE	D FOR E-RECEIPT)
) Gift details		
) Gift details	How would you	u like to be recognized online?
	O Donor name	u like to be recognized online? (same as above)
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Amount \$ On behalf of the control o	O Donor name O Anonymous Name for Rec	(same as above) cognition: I for supporting the BC SPC

• 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