



David Suzuki Foundation

Community fundraising donation collection form

Thank you for fundraising for the David Suzuki Foundation. Please print as many donation forms as needed and return with any cheques (payable to The David Suzuki Foundation). Put all donations and forms together in an envelope and mail to:

David Suzuki Foundation
Attention: Community giving
219-2211 West 4th Avenue
Vancouver, B.C. V6K 4S2

IMPORTANT: Do not send cash in the mail. Tally the cash and either submit a cheque payable to the David Suzuki Foundation for the total or submit a donation for the entire amount by credit card using the reverse of this form.

TAX RECEIPT INFORMATION: Donations of \$5 or more will receive a tax receipt via mail. Tax receipts will only be issued if the donation qualifies under CRA regulations. If a donor receives any benefits or materials goods, we are unable to issue a tax receipt through our community fundraising program. The David Suzuki Foundation is committed to maintaining your trust and confidence. For more information, please visit www.davidsuzuki.org/privacy.

Canadian charitable number BN12775 6716 RR0001 | United States charitable number 94-320404

Fundraiser Information:

Your full name or name of organization: _____

Street address: _____

City: _____ Province: _____ Postal code: _____

Phone: _____ Email: _____

Event location: _____ Date of fundraiser: _____

Brief description of fundraiser (how you raised these funds): _____

Donation Information:

1. Donation amount: \$ _____ **Donation method:** Cash Cheque TAX RECEIPT REQUESTED

First name: _____ Middle initial: _____ Last name: _____

Street address: _____

City: _____ Province: _____ Postal code: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

2. Donation amount: \$ _____ Donation method: Cash Cheque TAX RECEIPT REQUESTED

First name: _____ Middle initial: _____ Last name: _____

Street address: _____

City: _____ Province: _____ Postal code: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

3. Donation amount: \$ _____ Donation method: Cash Cheque TAX RECEIPT REQUESTED

First name: _____ Middle initial: _____ Last name: _____

Street address: _____

City: _____ Province: _____ Postal code: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

4. Donation amount: \$ _____ Donation method: Cash Cheque TAX RECEIPT REQUESTED

First name: _____ Middle initial: _____ Last name: _____

Street address: _____

City: _____ Province: _____ Postal code: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Additional funds
not requiring a receipt
(e.g., coin boxes) \$ _____

TOTAL FUNDS COLLECTED \$ _____

IMPORTANT: Tally all cash collected and submit by credit card or cheque payable to the David Suzuki Foundation:

Amount of total cash collected: \$ _____ Is this a collection of cash from several people? Yes No

Submitting by: Visa MasterCard American Express Cheque

CREDIT CARD NUMBER _____ EXPIRY DATE _____ SIGNATURE _____

Thank you for your support!