## MyDiabetesFundraiser

## OFFICIAL DONATION FORM

Fundraiser Name (Event):			
Email Address:			
Home Address:			
Method of Deposit: ☐ Cheque ☐ Credit Card ☐ Cash			

Participant Name:

• Please do not mail cash

• Please only include donors for whom you are currently submitting funds

• Donations over \$15 with a valid mailing address will receive a tax receipt for income tax purposes

• If a donation is under \$15 a receipt will be issued only if requested by the donor

Name of Donor	Address (Please print clearly)	Phone Number	Email Address	Amount Donated	Receipt Required (Yes or No)	Cheque Number
Fundraising money/miscellaneous cash donations not requiring a receipt						
Total donations remitted				ΙΦ		

Card Holder Name:	Credit Card Number:

Expiry date: CVV:

Send Dentations forms and/or Cheques to: My Diabetes Fundraiser

**Diabetes Canada** 1300-522 University Avenue Toronto, ON M5G 2R5

