



Phone: 604-299-5754

Address: 2055 Rosser Avenue, Burnaby, BC, V5C 0H1

Fax: 604-299-3755

Website: www.burnabymeals.ca

DONATION FORM

Charitable Registration Number – 10681 9345 RR0001

I want to promote health and independence for people who for, physical or mental health; social or economic reasons are unable to meet their dietary needs in their homes.

I'd like to support the work of Burnaby Meals on Wheels!

I would like to donate \$_____ to support Burnaby Meals on Wheels.

I will donate by: Cheque (Cheques should be made out to: **Burnaby Meals on Wheels Society**)
 VISA MasterCard

Card Number: _____ Expiry date: _____
(please print clearly)

Signature: _____

Please send a tax receipt to: Mr. Mrs. Ms. Other: _____ (Please print clearly)

Name: _____ Phone: _____ Email: _____

Address: _____

City: _____ Postal Code: _____

(Tax receipts will be issued for gifts of \$20 or more.)

Thank you for your generous support!