



FOR OFFICE USE ONLY I.D. # _____

Organization Name: _____

Total Received: _____ Process Date: _____ By: _____

Name	Home Address (Street, City, Province, Postal Code) <i>Full address is required for Canada Revenue Agency Guidelines.</i>	Email Address <i>Used to send event updates and breast cancer information.</i>	Cash Cheque	Amount(\$)
Susie Sample	50 Carlton Street, Toronto, ON M5B 1J2	info@bustamovetoronto.ca	Cash	\$20.00
			Total	

Don't forget to visit www.bustamovetoronto.ca for additional pledge forms! OR
 Create an online donation page for your team by visiting www.bustamovetoronto.ca . Your friends and family can easily join and donate right online. Please make all cheques and money orders payable to Breast Cancer Society of Canada. Charitable tax receipts will be issued for donations of \$20 or more in accordance with Canada Revenue Agency Guidelines. All information must be complete and legible. Please return donations and pledge sheet(s) to the Breast Cancer Society of Canada, 420 East St N, Sarnia ON N7T6Y5. An envelope is provided for your convenience.
 BN# 137969861RR0001

**THANK
you!**