

DONOR INFORMATION

In compliance with anti-money laundering regulations and best practices, CAF Canada requests donor's full name, address, and date of birth.

FULL NAME:
ADDRESS: (No PO Boxes)
PHONE: FAX: DATE OF BIRTH:
EMAIL:
GIFT INFORMATION PLEASE CHECK ONE:
I enclose a check payable to CAF Canada in the amount of \$
I enclose details of a wire transfer made to CAF Canada in the amount of:
I enclose details of a stock transfer made to CAF Canada Symbol:# of shares:
Please charge \$ to my MasterCardVisa American Express
*Please note billing address must match home or business address provided above.
NAME AS IT APPEARS ON CARD:
ACCOUNT NUMBER: EXP DATE: SECURITY CODE:
SIGNATURE:
CAF Canada applies an administrative fee to all contributions to International Project Funds: 5% of the first \$500,000; 3% of the next \$500,000; 1% of the next \$2,000,000; 0.5% of any additional amount per contribution

I SUGGEST MY GIFT BE USED TO SUPPORT: STAY STRONG VS. ALS

- □ I/We would like the gift to remain anonymous.
- CAF Canada does not sell, trade or otherwise share our mailing lists. We use your information for project updates, tax receipts and other relevant information. If you would like to opt out of receiving general news and ongoing CAF Canada information please check here.

I understand that my gift to CAF Canada becomes the property of CAF Canada and that CAF Canada has ultimate control, authority, and discretion with regard to its assets. All projects completed by CAF Canada are in its sole and independent discretion. I confirm that I will receive no tangible benefit or privilege from either CAF Canada or any suggested charity in return for my donation.

SIGNATURE:

DATE:

All donations must be accompanied by a signed Gift Form. All donations without a signed Gift Form will be returned. CAF Canada is required to confirm donor identity in accordance with anti-money laundering regulations and best practice recommendations. CAF Canada does not distribute, sell, or otherwise release any donor information for any reason unless required by law. CAF Canada does not add donor information to internal mailing lists without express permission.

Please make copies of this form as needed. Send the form, together with your donation to:

Mail: CAF Canada 100 King Street West | Suite 5600 Toronto ON | M5X 1C9 | Canada Phone: 416.362.2261 Email: info@cafcanada.ca

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