



Gawad Kalinga Canada  
2901 Bayview Ave. , PO Box 91052 Bayview Village  
Willowdale, ON M2K 2Y6  
(CRA Reg #: 841583917RR0001)

Form C

Ref #: \_\_\_\_\_

Date: \_\_\_\_\_

**DONATION FORM**

Name of Donor: \_\_\_\_\_

Address: \_\_\_\_\_

Tel #: \_\_\_\_\_ Email Address: \_\_\_\_\_

My donation is \$ \_\_\_\_\_. Receipt Req'd: Yes \_\_\_ No \_\_\_

Received in: \_\_\_ cash or \_\_\_ cheque payable to Gawad Kalinga Canada

Cheque Details: Bank: \_\_\_\_\_ Cheque #: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_ credit card (please fill up credit card information below)

I authorize Gawad Kalinga Canada to charge my Credit Card: \_\_\_ VISA \_\_\_ Mastercard

Name on card \_\_\_\_\_

Billing Address (if different from above): \_\_\_\_\_

Card number \_\_\_\_\_ CSC \_\_\_\_\_ Expiry Date \_\_\_\_\_

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please direct my gift to (choose only one):**

- 1) \_\_\_ Support the work of Gawad Kalinga Canada
- 2) \_\_\_ Build homes for \_\_\_\_\_

**For use by GKC:** Prepared by Volunteer \_\_\_\_\_ Rec'd by FinMgr/Treasurer \_\_\_\_\_

Concurred by ED or Comm. Head \_\_\_\_\_ Rec'd by Bookeeper \_\_\_\_\_

Date of Input in e-tapestry: \_\_\_\_\_

Privacy policy: Gawad Kalinga Canada is committed to protecting your privacy. Personal information collected will only be used to process this request, send an acknowledgement, e-receipt, e-newsletter, updates and to provide information for future events  
Tax Receipts will be issued for donations of \$20 or more in January of the following year.