

## IN MEMORIAM DONATIONS:

The family contact of the person memorialized or honored will be notified of your generous gift but will no amount will be named. Our notification letters are issued each month to our family contact. Charitable tax receipts will be issued for eligible donations of \$20 or greater if a full mailing address is provided.

Name of Donor(s): \_\_\_\_\_

Address of Donor: \_\_\_\_\_

\_\_\_\_\_

Phone Number of Donor: \_\_\_\_\_

Email: \_\_\_\_\_

If the person you are honoring was not a resident of Carpenter Hospice, please provide family contact information:

Contact Name: \_\_\_\_\_

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

\_\_\_\_\_

Donation in Honor of: \_\_\_\_\_

Do NOT notify the family of my donation

Donation Amount: \$ \_\_\_\_\_

Enclosed is my cheque made payable to Carpenter Hospice

I prefer to use my credit card:

Master Card    VISA    American Express

Name on Credit Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature: \_\_\_\_\_



Carpenter Hospice

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Donate Online: www.thecarpenterhospice.com

Charitable Status Number: 86312 1125 RR0001