



DONATION FORM – Multiple Sponsors

Participant Information (tip: fill out this top section before making copies)

Name		
Address		
City	Postal code	Telephone # () Fax # ()

Donor Information:

Please make cheques payable to *The Leukemia & Lymphoma Society of Canada*.

PLEASE PRINT CLEARLY – TAX RECEIPTS WILL ONLY BE ISSUED IF ALL INFORMATION IS LEGIBLE

Name	Complete Address, City, Province	Postal Code	Donation Amount	Cash	Chq	Receipt Required? (\$10minimum)
				Please check (✓)		
1						
2						
3						
4						
5						
6						
Total Donation Amount →			\$	\$		
				Total Cash ↑	Total Chqs ↑	

Please do not mail cash. For cash donations, kindly write us a cheque for the full cash amount – a receipt will still be issued to each donor/sponsor on this sheet.