

## **DONOR ORDER FORM**

Please print the name and full address of the tax receipt recipient below:				
Name:				
Address:				
City:				
Province/ State:				
Postal / Zip Code:				
Country:				
ITEMS	PRICE	QUANTITY	TOTAL	
BEDKITS	\$40 ea		<b>\$</b>	

**\$6 ea** 

\$25 ea

GRAND TOTAL	\$
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Canadian Donors Receive a Canadian Tax Receipt

Registered Canadian Charitable Number: 131634396RR0001

US Donors Receive a US Tax Receipt

(package of 10 with envelopes)

**MURRAY'S AUTOBIOGRAPHY** 

"With God, Nothing is Impossible"

HASTI-NOTE

US Charitable Tax Identification Number: 27-3609416

Every child is photographed with their bedkit. The photo is mailed to the designated recipient.

Pictures will be mailed within four to six months to the address above.

To specify other names / addresses for special occasion gifts please see next page.



## PICTURE ADDRESS AND CUSTOM LABEL INFORMATION

Gift Recipient Name:		CUSTOM	LABEL
Address:			
City:			
Country:			
•	•		
Number of Bedkits to send to			
Gift Recipient Name:		CUSTOM	LABEL
Address:			
City:	Province/ State:		
Country:	Postal / Zip Code:		
Number of Bedkits to send to			
	•		
Gift Recipient Name:		CUSTOM	LABEL
Address:			
City:	Province/ State:		
Country:	Postal / Zip Code:		
Number of Bedkits to send to	this address: Qty:		
		CUSTOM	IAREI
Gift Recipient Name:			LABEL
Address:			
City:	Province/ State:		
Country:	Postal / Zip Code:		
Number of Bedkits to send to	this address: Qty:		
	ABEL - PLEASE SE	E EXAMPLES BELOW.	
Example: "Special Occasion"		Example: "In Memoriam"	Example: "Donor"
PATRICIA		IN MEMORY OF	
<u>CHRISTMAS</u> FROM	<u> </u>	SMITH	SMITH   50TH BIRTHDAY
MAURICE		JOHN JONES	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \