

# Tax Receipt Form for BullyingCanada Fundraiser

Event name: \_\_\_\_\_ Date: \_\_\_\_\_

Organizer's name: \_\_\_\_\_ Telephone # (\_\_\_\_\_) \_\_\_\_\_

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

**Please provide charitable tax receipts for the following donors who made cash donations at our event. Donations of \$5 or more will be receipted. Within 60 days of receiving event proceeds, email receipts to donors who supply email addresses, and mail them to those who do not supply an email.**

1. Full Name: \_\_\_\_\_ Donation Amount: \$\_\_\_\_\_

Mailing address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_

2. Full Name: \_\_\_\_\_ Donation Amount: \$\_\_\_\_\_

Mailing address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_

3. Full Name: \_\_\_\_\_ Donation Amount: \$\_\_\_\_\_

Mailing address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_

4. Full Name: \_\_\_\_\_ Donation Amount: \$\_\_\_\_\_

Mailing address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_

5. Full Name: \_\_\_\_\_ Donation Amount: \$\_\_\_\_\_

Mailing address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_

6. Full Name: \_\_\_\_\_ Donation Amount: \$\_\_\_\_\_

Mailing address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_

***Thank you to everyone who made a caring donation to BullyingCanada!***

**Organizer: After submitting the proceeds from your event, please email this form to:  
Fundraising@BullyingCanada.ca**