

VIRTUAL Light Up The Lake 2021 - CANADA PLEDGE FORM

Name: _____
 Address: _____
 City: _____ Postal Code: _____
 Tel: _____ Email: _____

For issuing of income tax receipts, **please ensure name and address are complete.** Otherwise, a receipt cannot be issued.

A receipt will be issued for pledges of \$10 or more.

Please make sure all cheques are made payable to **Craig's Cause Pancreatic Cancer Society.**

				Amount Pledged	Amount collected
Name:		Address:			
City:		Province:	Postal Code:	Email:	
Name:		Address:			
City:		Province:	Postal Code:	Email:	
Name:		Address:			
City:		Province:	Postal Code:	Email:	
Name:		Address:			
City:		Province:	Postal Code:	Email:	
Name:		Address:			
City:		Province:	Postal Code:	Email:	
Name:		Address:			
City:		Province:	Postal Code:	Email:	
Name:		Address:			
City:		Province:	Postal Code:	Email:	

Visit our website at: www.craigsc ause.ca

Charitable Business No. 84235 2759 RR0001

Craig's Cause Pancreatic Cancer Society Address:
 P.O. Box 8561 Halifax, Nova Scotia B3K 5M3

Total:

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