



'IN KIND' DONATION FORM

This form is to be used when donating goods and/or services to the BCCF.

The following information is needed in order to issue an official receipt for Income Tax purposes. Your donation is greatly appreciated.

COMPANY/ INDIVIDUAL NAME _____

CONTACT PERSON _____

ADDRESS _____

Postal Code _____

PHONE _____ FAX _____

EMAIL ADDRESS _____

DESCRIPTION OF
DONATION _____

FAIR MARKET VALUE OF DONATION _____

Please attach the receipt if the donation was purchased.

SIGNATURE OF DONOR _____

DATE _____

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PO Box 4397
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OR 1 877 733 9688
Fax: 604 733 0426
BCCF @ BCChoralfed.com

