



Strive to Monaco Item Donation Form

Name: _____ Address: _____

Company Name: _____ City: _____

Contact Email: _____ Province: _____

Contact Phone: _____ Postal Code: _____

Donation Information

Example:
Category : Clothing Donation amount: \$100

My Donation:

Category : _____ Donation amount: _____

Category : _____ Donation amount: _____

Category : _____ Donation amount: _____

Category : _____ Donation amount: _____

Category : _____ Donation amount: _____

Payment Option:

I have enclosed a cheque payable to "Strive Living Society" to 400-906 Roderick Ave. Coquitlam BC V3K 1R1

I hereby authorize Strive Living Society to charge my credit card in the amount of CDN\$ _____

Card Type: Visa MasterCard American Express

Credit Card Number: _____

Card Holder Name: _____

Expiration Date: _____

Comments or Instructions:

- Tax receipt issued for donations \$25 and over