



# Tax Receipt Request Form

## FOR CASH OR CHEQUE DONATIONS ONLY

Do not include online donations, an electronic tax receipt is automatically issued at time of donation.  
Please note: Tax receipts cannot be issued for sweepstake entry purchases.

Company Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Please print clearly.**

Name: _____	Money Collected?	Yes / No
Home Address: _____		
City: _____ Postal Code: _____		
Telephone: _____ Email: _____		
Donation Amount: \$ _____ Cash/Cheque (Please circle)		
Please do not contact me via (check all that apply): <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Telephone		

Name: _____	Money Collected?	Yes / No
Home Address: _____		
City: _____ Postal Code: _____		
Telephone: _____ Email: _____		
Donation Amount: \$ _____ Cash/Cheque (Please circle)		
Please do not contact me via (check all that apply): <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Telephone		

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Name: _____	Money Collected?	Yes / No
Home Address: _____		
City: _____ Postal Code: _____		
Telephone: _____ Email: _____		
Donation Amount: \$ _____ Cash/Cheque (Please circle)		
Please do not contact me via (check all that apply): <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Telephone		

**Return this form with your donations to:** **Second Harvest Canada**  
**120 The East Mall**  
**Etobicoke, ON M8Z 5V5**

Second Harvest respects your privacy. We protect your personal information and adhere to all legislation concerning protection of privacy. We do not sell, rent or share our mailing lists. For our full privacy policy, please visit [secondharvest.ca/privacy-policy](http://secondharvest.ca/privacy-policy).  
CHARITABLE REGISTRATION NUMBER 13386 5477 RR0001