



Inspiring Possibilities

I WOULD LIKE TO MAKE A DONATION TO:

COMMUNITY LIVING DUFFERIN

BUILDING DREAMS TOGETHER Capital Campaign

I / We want to pledge a total of \$_____.

This amount will be paid in the following way:

\$_____ as a one-time payment in full.

\$_____ per year for _____ years, starting on: ____ / ____ / ____.

\$_____ per month for _____ months, starting on: ____ / ____ / ____.

Contact Info:

Cheque

Mastercard

Visa

Card # _____ Expiry _____

Cardholder Name _____

Signature _____

Address _____

City _____ Prov _____ PC _____

Telephone _____ Email _____

Thank-you for your support!

Charitable Registration #12589 3586 RR0001