



CONTRIBUTION FORM

YES! I would like to donate to the South Cariboo Community Enhancement Foundation to help make our community a better place to live.

Donor Name:	Phone:
Contact Name:	Email:
Address:	Other:
	<input type="checkbox"/> I wish to remain anonymous

I wish to make my contribution by:	Amount of contribution: \$
<input type="checkbox"/> Cheque	<i>Cheques can be made payable to the South Cariboo Community Enhancement Foundation and can be mailed to: PO Box 2169, 100 Mile House, BC V0K 2E0</i>
<input type="checkbox"/> Visa	Card #
<input type="checkbox"/> Mastercard	Expiry Date:
<input type="checkbox"/> Stock	Date to be charged for contribution:
<input type="checkbox"/> Pledge	A Foundation representative will contact you to discuss the details for this type of gift
Over a period of:	<input type="checkbox"/> 1 Year <input type="checkbox"/> 2 Years <input type="checkbox"/> 5 Years <input type="checkbox"/> Other
Payment schedule will be:	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly <input type="checkbox"/> Other
<input type="checkbox"/> Estate Planning:	<i>A Foundation representative will contact you to discuss options for the following gifts:</i>
<input type="checkbox"/> Bequests	<input type="checkbox"/> Residual Interest Trust
<input type="checkbox"/> Life Insurance	<input type="checkbox"/> Charitable Remainder Trust
<input type="checkbox"/> Gift Annuity	<input type="checkbox"/> Pooled Income Fund
<input type="checkbox"/> Real Estate	

I wish to learn more about establishing one of the following:	
<input type="checkbox"/> Corporate/Business Fund	<input type="checkbox"/> Family Fund
<input type="checkbox"/> Memorial Fund	<input type="checkbox"/> Organization Fund
<p>Please submit this completed form to the South Cariboo Community Enhancement Foundation by Fax: 250-395-1088; Email: info@sccef.org or Mail: Po Box 2169, 100 Mile House, BC V0K 2E0</p> <p>THANK YOU FOR YOUR SUPPORT!</p>	