Soka Gakkai International
Association of Canada
2050 Dufferin Street
Toronto, Ontario M6E 3R6

SGI Canada Special Fund Receipt

(Not for Income Tax Purposes)

Date ____ Month ____ Day ____ Year

Charity BN / Registration #:
12984 9899 RR0001

Amount: _____ $ _____ . _____ CASH CHEQUE

Donor's Name: _____ First Name _____ Family Name

Commonly Know As: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Area: _____ Chapter: _____ District: _____

FOR SGI CANADA USE

SKF GOH OG Other ( )

Donor Practitioner No. _____

Amount _____ . _____

For Month ____ 20 Year ____

PLEASE NOTE:

This contribution is not refundable

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Your ofcfiail Tax Receipt can ***be issued to one name only***

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Once a Tax Receipt has been ***assigned, it cannot be changed***

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An ofcfiail Income Tax Receipt ***will be issued in February***

Please Initial

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