

# Donor Pledge Form

## SAMARITANS WITHOUT BORDERS CANADA

A tradition of helping the needy

145 Bulman Drive, Moncton, NB, E1G 4Y5, Canada Email: [swbcanada@yahoo.ca](mailto:swbcanada@yahoo.ca)

### Donor Information (please print or type)

Name	
Billing Address	
City	
Province	
Postal Code	
Telephone (home)	
Telephone (business)	
Fax	
E-mail	

### Pledge Information

I (we) pledge a total of \$ \_\_\_\_\_ to be paid:  
\_\_\_\_ now \_\_\_\_ monthly \_\_\_\_ quarterly \_\_\_\_ yearly

I (we) plan to make this contribution in the form of:  
\_\_\_\_ cash \_\_\_\_ cheque \_\_\_\_ credit card \_\_\_\_ other

Credit card type	
Credit card number	
Expiration date	
Authorized signature	
Name on credit card	
	Bank Pre authorized Payment
Name on Account	
Name of Bank	
Bank Number	
Bank Transit Number	
Account Number	

Gift will be matched by \_\_\_\_\_ (company/family/foundation)  
\_\_\_\_ form enclosed \_\_\_\_ form will be forwarded

### Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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\_\_\_\_ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make cheques, corporate matches, or other gifts payable to:

Rehema Heart for Africa Foundation