

Family Services of the North Shore Christmas Bureau Tax Receipt Request (Minimum \$20)

SUBMISSION DEADLINE: DECEMBER 31, 2012



ALL ORIGINAL RECEIPTS MUST ACCOMPANY THIS FORM

Receipts of all Gift Certificates must be included with this form.

- Tax Receipts are issued for donations of newly purchased items with current dated sales receipts.
- Please keep an additional copy for your records. Allow 4-6 weeks for processing.
- The name, address and phone number of the person listed below will be issued the tax receipt.
- **Be sure to include your Family Registration #.**

FAMILY REGISTRATION #12- _____ **(one form per Family Registration #)**

Mr. Mrs. Ms. Dr. (Circle One) Individual Corporate (Circle One)

Last name _____ First name _____

Phone (____) - ____ - _____ Work/Cell (____) - ____ - _____ Fax (____) - ____ - _____

Organization/Company: _____

Mailing Address: _____

City _____ Province ____ Postal Code ____ - ____

Email _____

I declare all of the items listed below were donated to Family Services of the North Shore Christmas Bureau as 'Goods in Kind'. I understand that I may be asked to provide further information.

SIGNED _____ DATE _____

The following items were purchased for Family Registration # 12- _____

Store	Brief Description of Item Purchased (i.e. grocery, toys, toiletries)	Cost Excluding Tax