

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

**SUBMISSION DEADLINE: DECEMBER 31, 2013**




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**ALL ORIGINAL RECEIPTS MUST ACCOMPANY THIS FORM**  
Receipts of all Gift Certificates must be included with this form.

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- 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 #.**

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**FAMILY REGISTRATION #13-** \_\_\_\_\_ **(one form per Family Registration #)**

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

Last name \_\_\_\_\_ First name \_\_\_\_\_ Initial \_\_\_\_\_

Phone (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ Work/Cell (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

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 \_\_\_\_\_

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**The following items were purchased for Family Registration # 13-** \_\_\_\_\_

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