



DEEP RIVER & DISTRICT COMMUNITY FOUNDATION

PO Box 1171, Deep River, ON, K0J 1P0
www.drdcf.ca info@drdcf.ca

Form Number: DONATE_002

Date Received	Application No.
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(For office use only)

IN MEMORIAM DONATION FORM

Donor Information	
Name:	Title/Position:
Mailing Address:	
Telephone:	Fax:
Email:	
In Memoriam Information	
In Memory of:	
Amount: \$	
Fund:	
<i>In Memoriam donations are usually placed into the Community Fund. If you wish to donate to another Fund, please specify (see https://www.drdcf.ca/funds for a list of Funds).</i>	

Make cheque payable to the DRDCF. All donations of **\$10 or more** will receive a tax receipt.

Signature:	Date:
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For questions, please contact the DRDCF at info@drdcf.ca

When completed, mail this form with your cheque to:
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