



YOUR USED FURNITURE WILL CHANGE A LIFE

YES, I/WE WOULD LIKE TO SUPPORT FURNITURE BANK

Please mail to:
25 Connell Court Unit 1
Toronto, ON
M8Z 1E8

Enclosed is a one-time donation of \$_____

Enclosed is my monthly gift of \$_____ (you will receive your tax receipt annually at the end of each calendar year.)

If you are becoming a monthly donor, which date do you want your monthly gift deposited each month? i.e. the 1st, 15th, 30th, etc.

Name(s)* _____ (*as will appear on the tax receipt)

Address _____

City _____ Prov _____ Postal Code _____

*Email _____ Phone _____

PAYMENT OPTIONS

Cheque/Cash Enclosed - Payable to FURNITURE BANK

Direct Deposit (please include a void cheque)

Credit Card

Visa / Mastercard / AMEX (please circle)

Card Number: _____

Name of Card Holder _____

Expiry Date _____

3 Digit CVV Number _____

Signature _____