

# COMPASSION

**Help us maximize your donation: PLEASE DONATE ONLINE!**

SECURE WEBSITE: [jhsbfriends.ca/donate](http://jhsbfriends.ca/donate)

Jeffery Hale – Saint Brigid’s Friends’ Foundation  
2000-1270, chemin Sainte-Foy, Quebec City, Quebec G1S 2M4

TELEPHONE 418-684-2260 EMAIL [give@jhsbfriends.ca](mailto:give@jhsbfriends.ca)  
WEBSITE [jhsbfriends.ca](http://jhsbfriends.ca)



THANK YOU FOR YOUR SUPPORT. Tax receipt for donations of \$20 and more.

IF YOU CANNOT DONATE ONLINE, FILL OUT THIS FORM AND SEND IT BY EMAIL (OR REGULAR MAIL).

## ONE-TIME DONATION FORM

### DONATION AMOUNT

\$250  \$100  \$50  \$30  OTHER \$ \_\_\_\_\_

### DONOR INFORMATION

First name \_\_\_\_\_ Family name \_\_\_\_\_

Address \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**YES** - PLEASE PUT ME ON THE FOUNDATION'S MAILING LIST

### PAYMENT METHOD

CHEQUE Include your cheque made out to: **Jeffery Hale – Saint Brigid’s Friends’ Foundation**

CREDIT CARD  Visa  Mastercard

Cardholder’s name \_\_\_\_\_

Card number \_\_\_\_\_ Expiry date \_\_\_\_/\_\_\_\_

CVV/CVC number \_\_\_\_\_

(THREE DIGITS ON THE BACK OF CARD)

### TYPE OF DONATION

GENERAL  IN MEMORIAM  IN HONOUR  OTHER (SPECIFY) \_\_\_\_\_

Donation in memory, or in honour, of \_\_\_\_\_  
PERSON'S NAME

### IF YOU WISH, YOU MAY DIRECT YOUR DONATION:

Where it will help the most  The residence and geriatric care at Jeffery Hale  Palliative care at Jeffery Hale  
 Saint Brigid’s Home  Jeffery Hale Community Services

**YES** - PLEASE SEND A NOTICE OF MY DONATION TO: (THE AMOUNT OF YOUR DONATION WILL REMAIN PRIVATE)

First name \_\_\_\_\_ Family name \_\_\_\_\_

Address \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Email \_\_\_\_\_

BY EMAIL  BY REGULAR MAIL

