

ADDICTIONS RECOVERY INC.

DONATION FORM

Enclosed is my / our gift of: \$ _____

Please make your cheque or money order payable to Addictions Recovery Inc. and provide the following information so we can send you a receipt for income tax purposes. (Please Print)

Name: _____

Address: _____

_____ Postal Code: _____

Phone: _____

Mail to: ADDICTIONS RECOVERY INC.

93 Cathedral Avenue
Winnipeg, Manitoba
R2W 0W7

Phone: (204) 586-2550
Fax: (204) 589-8977
Email: info@addictionsrecovery.ca