



PROVIDING HOPE AND RESPECT, RESOURCES AND SUPPORT TO FAMILIES AND FRIENDS
AFFECTED BY DRUG USERS. TOGETHER WE WILL MAKE A DIFFERENCE.

I am making a donation for which I wish to receive a tax creditable receipt.

Your name:

Address:

City, province

Postal code:

Telephone:

Email address:

PLEASE CHECK ONE CHOICE BELOW AND FILL IN AN AMOUNT

For my contribution of \$ I'm enclosing a cheque payable to
From Grief to Action.

I'd prefer to make monthly contributions of \$, so I'm enclosing
post-dated cheques payable to From Grief to Action.

Please mail this form with your cheque to:
From Grief To Action
c/o St. Mary's Church
2490 West 37th Avenue
Vancouver, B.C. V6M 1P5

Thank you for your help!

From Grief to Action
info@fgta.ca

Charitable Registration # 88871 9812 RR0001