

THE LEONARD CHARITIES TRUST

REQUEST FOR DONATION FORM

Name of Organization _____
and _____
Address _____

Contact Person _____

Charity Number -----

Under what authority is your organization managed ? Provide supporting evidence including name of Directors.

NOTE: Donations may be granted "...for such charitable, religious and educational objects and purposes... for organizations that have a regional provincial or national mandate." Outline briefly the specific purpose for which this request is being made.

Amount of donation requested \$ -----

Was a donation granted last year __ NO __ YES If Yes, what amount \$ _____

Signature of person submitting this Request

Date _____

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PLEASE NOTE: This application must reach the Honourary Secretary, The Leonard Foundation, 66 Wellington St. W. Second Floor, Toronto ON M5K 1A2 not later than April 15.
