## **City Cemetery Reserve Fund Donation to City of Winnipeg Cemeteries Branch**

I (Full name):				
of (Address):				
Phone:		Er	nail:	
Hereby donate the sum of Reserve for the following				invested into the City Cemetery
☐ Brookside Ce	metery	☐ St. Vital	Cemetery	☐ Transcona Cemetery
				formation) may be made by: cash, e to "The City of Winnipeg").
I understand that:				
☐ This donation is nonre	fundable;			
☐ This donation will be in	nvested in th	ne City Cemete	ery Reserve a	s I have indicated above; and
☐ A Tax Exemption rece Department.	ipt will be m	ailed to me by	the City of W	innipeg Corporate Finance
Signature:				Date:
For office use only:				
Paid by:   Cheque  Date paid:	□ Visa	☐ Amex	□ Interac	☐ M/C Cash CSA·