

Donation Tally Sheet

Thank you for supporting Children’s Cancer Institute.

This form is for use when collecting cash or cheque donations. Credit card payments can be directed to your fundraising page.

INSTRUCTIONS TO FUNDRAISERS: Return this tally sheet with the payment.

Payment attached:

Cheque payable to Children’s Cancer Institute Australia, post to PO Box 81, Randwick NSW Australia 2031

Direct Deposit Bank St George Bank BSB 332 051 Account Number 553008053 Account Name Children’s Cancer Institute with Reference Number **EFAC17** and email deposit receipt to info@endureforacure.org.au

Note: Receipts cannot be issued for non-cash donations/pledges, raffle ticket purchases or registration/entry fees. Please allow 7 – 10 days for receipts to be issued.

Donation Details (Please print clearly)			Donation Amount	Receipt Required	Receive Updates
Title: Name:	Ph:		\$	Y / N	Y / N
Address:	State:	Pcode:			
Title: Name:	Ph:		\$	Y / N	Y / N
Address:	State:	Pcode:			
Title: Name:	Ph:		\$	Y / N	Y / N
Address:	State:	Pcode:			
Title: Name:	Ph:		\$	Y / N	Y / N
Address:	State:	Pcode:			
Title: Name:	Ph:		\$	Y / N	Y / N
Address:	State:	Pcode:			
Page Total			\$		

Name: _____

Signature: _____

Date: _____

Total Collected: \$ _____



Donation Details (Please print clearly)			Donation Amount	Receipt Required	Receive Updates
Title: Name:	Ph:		\$	Y / N	Y / N
Address:	State:	Pcode:			
Title: Name:	Ph:		\$	Y / N	Y / N
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			Page Total	\$	

Name: _____

Signature: _____

Date: _____

Total Collected: \$ _____

