



\$195 will deliver a wheelchair to someone in need of Hope, Mobility, Freedom and Independence.				
Enclosed is my tax-deductible do	nation of	○ \$195	○ \$390	• Other
Council State. Ontario – Paraguay 2020				
Donor Name				
Mailing Address				
City Pro	vince /State	Р	ostal Code/Z	ip
Telephone	* Email			
For a donation of \$195, you will rece NO - I would not like to receive a Cer				
Certificate will Read: Canadian	Wheelchair Four	ndation wis	hes to thank	
\Box Donor (as noted above) / or \Box other	:			
For the Gift made: 🛛 in t	he Name of:	🗌 in Me	•	☐ in Honour of:
Please mail to me at the above a				
Address				
City Pro	vince /State	F	ostal Code/Z	Zip
WHOLE CONTAINER OPTIONS: (Con \$54,600 = 280 standard / 260 mount \$21,450 = 110 standard / 100 mount	ain bike tire wheelcl	hairs to:		
Cheque enclosed / or Credi Name as it appears on card	t Card : ○ Visa			
Card Number			Ex	piry Date
PLEASE MAKE CHEQUES PAYABLE TO: Charitable Registrati	Canadian W P.O. Box 7503 Surrey, BC CANADA V4A 0B1 ion No. 88861 5606 RF	8, RPO Wh		on
Fax to (604) 536-9831 For more information, to watch PLEA		ir distributic	ons around the	e world or to donate online,

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