

Receipt Request Form

What do I use this form for?

Please use this form if you have **guests at your Girls' Night In who donated via cash or cheque, and would like a tax-deductible receipt** for their donation. Guests will receive their receipt to the address details provided on the form.

Guests who donate online will automatically receive a receipt, so you won't need to include their details on this form.

All donations \$2 and over are tax-deductible.

How do I use this form?

- 1 On the back of this page is the form your guests can use to request a tax-deductible receipt for their cash or cheque donation to your Girls' Night In. **Print out copies** of this form and hand them out to guests, or **email this form** to guests to fill out electronically. They can open and edit the form in their web browser.
- **2** Ask your guests to fill in their details and hand the forms back to you.
- 3 Count the total number of receipts requested and the total value of the receipts requested, and fill these details in below. This will help us to make sure we're sending the correct receipts to everyone who needs them!

First Name:	Last Name:					
Supporter ID:						
Total amount raised at your event:	\$					
Total value of receipts requested:	\$					
Please let us know how you have submitted your funds						
Total amount submitted:	\$ Date of transfer:					
Method of money transfer:	Cheque Bank deposit Other:					
Please note: The easiest way to submit cash o	and cheque funds is by making an offline donation through your fundraising dashboard.					

4 Send this form back to us, addressed to:

Cancer Council Victoria Reply Paid 87108 Carlton South VIC 3053

5 If you would like to submit your funds to us by **bank deposit**, here are the details:

Account name: Girls' Night In

BSB: 013-128

Account number: 837725441

Please reference your Supporter ID on your bank deposit. This number can be found on your Letter of Authority, or alternatively please email us and we can provide your Supporter ID.

If you need help with any of the above, remember we're here for you! Call us Monday to Friday, 9am to 5pm on 1300 65 65 85 or email us at girlsnightin@cancervic.org.au.



Receipt Request Form

Thank you for your generous donation to **Girls' Night In!** If you made a cash or cheque donation and would like a tax-deductible receipt, please fill in your details below.

All donations \$2 and over are tax-deductible. Please use BLOCK letters and ensure your details are correct for tax receipt purposes.

Donation a	mount \$		Method:	Cash	Cheque	
Title	First Name		Surname			
This dor	nation is on behalf of a c	ompany. The company	name is:			
Contact Nu	umber					
I would like	to receive my receipt by:	:				
Email	My email address is:					
OR Mail	My mailing address is	:				
	State:	Postcode:				
			ation in accordance with our P	rivacy Policy.		
	nation inlease visit www.canc	ervic.org.au/privacv				
For more inform	nation, piease visit www.earie	January				
For more inform						
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 $Cancer\ Council\ Victoria\ is\ committed\ to\ handling\ your\ personal\ information\ in\ accordance\ with\ our\ Privacy\ Policy.$ For more information, please visit\ www.cancervic.org.au/privacy