



Grant Recommendation Form

Foundation Account Name		Date	Date	
RECOMMENDE	ED GRANTS: SELECTION OF CHARI	TIES		
Your Privacy:				
Canada Gives. These		vanied by a letter indicating the gifts were made from a do ull disclosure, as you wish. Kindly indicate how you would li me and address will be provided to the charity.		
Gift Amount or % of Annual Grants	Name of Canadian Registered Charity or Qualified	Donee Specific Program or Location (optional)	Donor Recognition	
			Yes No	
			Yes No	
			Yes No	
Additional Information				
SIGNATURE SE	CTION			
these recommendation from this account. I use	ons are subject to due diligence and final approval by nderstand that I can change /add recommendation	ed by Canada Revenue Agency to the best of my knowled y the Board of Directors of Canada Gives and that Canada is for grant recipients on this donor advised Foundation acc da Gives will grant the minimum annual disbursement requ	Gives will disburse the grants count at any time in writing to	
► Account Holder A	Authorization Date (mm/dd/yy	yyy) Joint Account Holder Signature	Date (mm/dd/yyyy)	