



SEPTEMBER 30, 2023

DOWNSVIEW PARK,
TORONTO

MATCH GIVING – REMITTANCE ADVICE

To Whom It May Concern: _____ (Company's HR or CSR contact)

This is to confirm that _____ is a registered participant in SickKids GetLoud, and is authorized to fundraise for SickKids Foundation.

As of today, we are delighted to confirm _____ has raised a total of \$ _____ (your personal fundraising tally) to help fund children's health.

To receive a gift confirmation for your match giving donation, please indicate donor name and email address.

Donor/Company Name: _____

Donor Email Address: _____

Match Giving Contribution can be made using one of the following **PAYMENT METHODS:**

☐ Bank Deposit ☐ Electronic Funds Transfer (EFT) ☐ Cheque/Money Order

Bank Details

Bank: CIBC – 010

Transit Number: 04702

Account Number: 4003810

EFT/Bank Deposit

Date of Transfer/Deposit: _____

Reference appearing against the EFT*: _____

*(Participant or Team Name who is to receive funds)

Cheque Please make sure **cheques are made out to 'SickKids Foundation'**

Once completed, please scan/email or print and send this form back together with your cheque(s)/copy of bank deposit receipt to: **SickKids Foundation – Attn: GetLoud**

525 University Ave., Suite 835 Toronto, ON. M5G 2L3

For any questions, please contact us at 416.445.3377. Thank you for your generous support.
(Please do not send cash. Thank you!)

Kind Regards,
Jamie Lamont
Director, Special Events & Sponsorship, SickKids Foundation