

Our Donation Card

Your Information

Name (Last, First, Middle): _____ Email: _____

Street Address: _____ Phone: _____

City, Province, Postal Code: _____

Your Donation

I wish to provide monthly support of CAD \$60/month or \$35/month (circle one) or _____ to
Sponsor a Grandchild/Senior (circle one) in Uganda

or

I wish to provide a one time gift of \$ towards the following fund (circle one):

Senior/Grandchild Friendship Business Stewardship Water and Sanitation
 Housing and Food Journey for Change Christmas Gift
 Health Centre Where Needed Most Other

Payment Method

By credit or debit card: Donate online at Canada Helps
<https://www.canadahelps.org/en/charities/reach-one-touch-one-ministries-canada/>

or

By cheque: Mail cheque to
Robert Abaliwano, Treasurer ROTOM Canada
2205 Grenville Drive
Oakville ON L6H 4X1

or

By e-transfer: Contact aburgoyne@reachone-touchone.org to set up.