



Association TORIYABA

Aide aux personnes vulnérables du Burkina Faso

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DONATION FORM

Fill in this form, then date and sign it. Then send it to the association head office

First name * : Last name * :

Address * :

email :

Cell phone : WhatsApp : Other number :

Donation amount (euros) * :

Details :

Payment mode * : Cash Cheque * Credit card Wire transfer **

(* Payable to « Association Toriyaba »)

(** contact us)

Need a receipt : *If you are a taxable individual in France, your donation may entitle you to an annual income tax*

Date * :
(Text or dd/mm/yyyy)

Signature * :
(Handwritten signature)

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* Required