

**Section A - Identification**

- To complete this form, you will need to attach the **Information Return, T4033A**.
- The **Privacy Act** protects personal information bank.
- Except for yes/no questions, fill in the information requested.



19 2005-04-30 891106841 RR 0001 0744540

Please attach a bar code label here before you mail this return. If no label, enter:

1. Fiscal Period Ending **2005/04/30**  
Year Month Day

2. BN/registration number **89110 6841 RR 0001**  
RC-05-806

**A1** Has the charity made any changes to its governing documents during the fiscal period (e.g., letters patent, articles of incorporation, constitution, trust, or by-laws)? (If yes, see the guide.) **1500**  Yes  No

**A2** Was the charity an internal division regulated by the governing documents of another charity (i.e., it had no governing documents establishing its independent existence)? If yes, what is the name and BN/registration number of the other charity? **1510**  Yes  No

Name	BN/registration number (##### ####RR#####) RR
------	--------------------------------------------------

**A3** Was the charity linked in a subordinate way to a provincial, national, or international organization? If yes, what is the name of this organization and its BN/registration number (if applicable)? **1540**  Yes  No

Name	BN/registration number (##### ####RR#####) RR
------	--------------------------------------------------

**A4** Has the charity wound-up, dissolved, or terminated operations? (If yes, see the guide.) **1570**  Yes  No

**A5** Has the charity amalgamated, merged, or consolidated with another organization? (If yes, see the guide.) **1580**  Yes  No

**Section B - Directors/Trustees and Like Officials**

**B1** You must attach a list with the last name, first name, and initial of each director/trustee and like official, home address (including street number, street name, city, province or territory, and postal code), position in the charity, whether or not they were a director/trustee at the end of the fiscal period, telephone number, if they are at arm's length from all other members of the governing board and their date of birth. Only the **Public information** section on the worksheet is available to the public. The **Confidential information** section is for the CCRA's use only and remains confidential. Use the worksheet included in the guide or a sheet with the same information in the same format to enter this information, and attach it to this return. See the guide for an explanation of the term **arm's length**. Have you attached the list required above? **1700**  Yes  No

**Section C - Programs and General Information**

**C1** Was the charity inactive during the fiscal period? If yes, please explain why in the "Ongoing programs" space below. **1800**  Yes  No

**C2** Describe how the charity carried out its charitable purposes during the fiscal period. Give detailed information so a reader can clearly understand what the charity actually did to fulfill its mandate. Describe the charity's **ongoing programs** and **new programs** in the spaces provided below. Do not attach additional sheets of paper or annual reports. Do not include a description of fundraising activities in this section. Grant-making charities should describe the types of organizations they support. Please number each program. (See the guide for instructions on how to describe your programs.)

<b>Ongoing programs</b>
It made gifts to "qualified donees"
<b>New programs</b>

**C3** For programs carried on in Canada, check the appropriate box to show where the programs were carried on.  
**2000**  A single rural, city, or metropolitan area     
**2010**  Provincially or territorially     
**2020**  In more than one province or territory

Received/Reçu  
Data Assessment & Evaluation Programs  
Vérification des Données et Évaluation  
**DEC 21 2005**

Ottawa Technology Centre  
Centre Technologie D'Ottawa

Received by / reçu par  
IHS - Charitable Organisation  
**DEC 19 2005**  
Organisme de bienfaisance



- C4** Did the charity carry on programs, directly or indirectly, outside Canada? 2100  Yes  No  
 If yes, were any carried out:
- by employees or volunteers of the charity? 2110  Yes  No
  - under agency agreement, contract, joint-venture, or similar arrangements? 2120  Yes  No
  - through gifts to qualified donees? 2130  Yes  No
  - by other means? 2140  Yes  No

**C5** For programs the charity managed directly, outside of Canada, list the countries or regions where programs were carried on. Do not include countries or regions where programs were managed by a qualified donee.


**C6** Did the charity issue scholarships, bursaries, awards, prizes, or honoraria to an individual during the fiscal period? 2300  Yes  No

**C7** A charity may pursue political activities that are non-partisan, related to its charitable purposes, and limited in extent. During the fiscal period, did the charity carry out political activities or provide assistance to another organization to carry out political activities? (See the guide for information on political activities.) 2400  Yes  No

**C8** If the charity carried on fundraising activities, check all fundraising methods that it used during the fiscal period.

- |                                                                                     |                                                                            |                                                                |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> 2500 Advertisements/posters/flyers/radio or TV commercials | <input type="checkbox"/> 2560 Fundraising dinners/galas/concerts           | <input type="checkbox"/> 2620 Telephone solicitations          |
| <input type="checkbox"/> 2510 Auctions                                              | <input type="checkbox"/> 2570 Fundraising sales (e.g., cookies, chocolate) | <input type="checkbox"/> 2630 Tournaments/sporting events      |
| <input type="checkbox"/> 2520 Bingo/casino nights                                   | <input type="checkbox"/> 2580 Mail campaigns                               | <input type="checkbox"/> 2640 Walk-a-thons/bike-a-thons (etc.) |
| <input type="checkbox"/> 2530 Collection plates/boxes                               | <input type="checkbox"/> 2590 Planned-giving programs                      | <input type="checkbox"/> 2650 Other                            |
| <input type="checkbox"/> 2540 Door-to-door solicitation                             | <input type="checkbox"/> 2600 Targeted corporate donations/sponsorships    | <input type="checkbox"/> 2660 Specify: _____                   |
| <input type="checkbox"/> 2550 Draws/lotteries                                       | <input type="checkbox"/> 2610 Targeted contacts                            |                                                                |

**C9** Did the charity use incentive-based compensation (e.g., bonuses, commissions, finder's fees, honoraria) for fundraisers? 2700  Yes  No

- If yes, were these incentives paid to:
- contracted fundraisers? 2710  Yes  No
  - staff or volunteers? 2720  Yes  No

**C10** Did the charity charge fees for, or otherwise receive regular revenue from goods, services, or the use of the charity's assets? 2800  Yes  No

**C11** Did the charity make gifts to qualified donees? 2900  Yes  No

If yes, you **must** attach a list with the name of each qualified donee and its location, BN/registration number, the total amount of the gift for the fiscal period, the amount, if any, of specified gifts, and whether or not it is an associated charity. List the qualified donees in the order of the total amount of the gifts made, starting with the largest. Use the worksheet included in the guide or a sheet with the same information in the same format and attach it to this return.

**C12** If the charity received non-cash gifts (gifts in kind) for which it issued tax receipts, check all the types of gifts that apply.

- |                                                       |                                                                                  |                                                                       |
|-------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> 3000 Artwork/wine/jewellery  | <input type="checkbox"/> 3040 Cultural property                                  | <input type="checkbox"/> 3080 Publicly-traded securities/mutual funds |
| <input type="checkbox"/> 3010 Building materials      | <input type="checkbox"/> 3050 Ecological property                                | <input type="checkbox"/> 3090 Privately-held securities               |
| <input type="checkbox"/> 3020 Clothing/furniture/food | <input type="checkbox"/> 3060 Machinery/equipment (including computers/software) | <input type="checkbox"/> 3100 Other                                   |
| <input type="checkbox"/> 3030 Vehicles                | <input type="checkbox"/> 3070 Hedge funds/life insurance policies                | <input type="checkbox"/> 3110 Specify: _____                          |

### Section D – Compensation

**Note:** Compensation includes all forms of remuneration (e.g., salaries, fees, and honoraria) and benefits (e.g., personal use of a car or office space).

- D1** On average, how many permanent, full-time, compensated positions did the charity have in the fiscal period? 3600
- D2** For the five highest compensated positions indicate the number of positions in each of the following annual compensation categories. Include only those positions that are permanent, full-time positions.
- |                                    |              |                                    |                   |                                    |                    |                                    |                    |
|------------------------------------|--------------|------------------------------------|-------------------|------------------------------------|--------------------|------------------------------------|--------------------|
| 3700 <input type="text" value=""/> | \$1–\$39,999 | 3710 <input type="text" value=""/> | \$40,000–\$79,999 | 3720 <input type="text" value=""/> | \$80,000–\$119,999 | 3730 <input type="text" value=""/> | \$120,000 and over |
|------------------------------------|--------------|------------------------------------|-------------------|------------------------------------|--------------------|------------------------------------|--------------------|
- D3** On average, how many part-time or part-year employees did the charity employ in the fiscal period? 3800
- D4** What was the total expenditure on compensation for part-time or part-year employees in the fiscal period? 3850 \$
- D5** Did the charity compensate any of its directors/trustees or like officials, during the fiscal period? 3900  Yes  No
- D6** Except for compensation, did the charity, directly or indirectly, transfer any part of its income or assets to individuals or organizations not at arm's length to the charity? 3950  Yes  No

**Section E – Financial Information**

E1 Was the financial information reported below prepared on an accrual or cash basis? **4020**  Accrual  Cash

E2 Please show figures to the nearest single dollar. Do not show cents. See the guide for an explanation of the terms.

Assets		Liabilities	
Cash, bank accounts, and short-term investments	4100 5,202,245	Accounts payable and accrued liabilities	4300 18,189
Amounts receivable from non-arm's length parties	4110	Deferred revenue	4310
Amounts receivable from all others	4120 55,888	Amounts owing to non-arm's length parties	4320
Investments in non-arm's length parties	4130	Other liabilities	4330 400,000
Long-term investments	4140 600,000	<b>Total liabilities (add lines 4300 to 4330)</b>	<b>4350 418,189</b>
Inventories	4150		
Capital assets (at cost or fair market value)	4160		
Other assets	4170	Amount included in lines 4150, 4160, and	
<b>Total assets (add lines 4100 to 4170)</b>	<b>4200 5,858,133</b>	4170 not used in charitable programs	4250

E3 Please show figures to the nearest single dollar. Do not show cents. See the guide for an explanation of the terms.

**Revenue**

Total eligible amount of tax-receipted gifts	4500 2,438,200
Total amount received from other registered charities	4510 795,000
Total specified gifts included in line 4510	4520
Total enduring property included in line 4510 (See the guide.)	4525
Total other gifts	4530
Revenue from federal government	4540
Revenue from provincial/territorial governments	4550
Revenue from municipal/regional governments	4560
Total revenue from government (add lines 4540, 4550, and 4560)	4570
Interest and investment income	4580 138,193
Proceeds from disposition of assets	gross 4590 net 4600 203,011
Rental income (land and buildings)	4610
Memberships, dues, and association fees (non tax-receipted)	4620
Total revenue from fundraising	4630
Total revenue from sale of goods and services (except to government)	4640
Other revenue	4650 (6,624)
<b>Total revenue (add lines 4500, 4510, 4530, 4570, 4580, and 4600 to 4650)</b>	<b>4700 3,567,780</b>

**Expenditures (Enter all expenditures, whether or not on charitable programs)**

Advertising and promotion	4800
Travel and vehicle	4810 16,481
Interest and bank charges	4820 28,367
Licences, memberships, and dues	4830 500
Office supplies and expenses	4840 3,000
Occupancy costs	4850
Professional and consulting fees	4860 99,632
Education and training for staff and volunteers	4870
Salaries, wages, benefits, and honoraria	4880
Donated and purchased supplies and assets expensed for the fiscal period	4890
Amortization of capitalized assets	4900
Research grants and scholarships as part of charitable programs	4910
Other expenditures	4920 3,133
<b>Total expenditures before gifts to qualified donees (add lines 4800 to 4920)</b>	<b>4950 151,113</b>
Total charitable programs expenditures included in line 4950	5000
Total management and administration expenditures included in line 4950	5010
Total fundraising expenditures included in line 4950	5020
Total political activity expenditures included in line 4950	5030
Total other expenditures included in line 4950	5040
Total gifts to qualified donees excluding enduring property	5050 1,668,975
Total enduring property transferred to qualified donees (See the guide.)	5060
Total specified gifts to qualified donees (See the guide.)	5070 1,915,000
<b>Total expenditures (add lines 4950, 5050, 5060 and 5070)</b>	<b>5100 3,735,088</b>

**Section F – Other Required Information**

**F1** What were the total expenditures on programs outside Canada during the fiscal period, excluding gifts to qualified donees? 5400 \$

**F2** If the charity retained contracted fundraiser(s), enter:

a. the gross revenues collected by the fundraiser(s) on behalf of the charity 5450 \$

b. the amounts paid to and/or retained by the fundraiser(s) 5460 \$

c. the net fundraising revenue received by the charity (line 5450 minus line 5460) 5470 \$

**F3** If the charity has written permission to accumulate property, enter:

- the amount accumulated for the fiscal period, including income earned for the fiscal period on previously accumulated funds 5500 \$
- the amount disbursed for the fiscal period for the specified purpose we have granted permission for 5510 \$
- the amount deemed to be a tax-receipted gift for the fiscal period 5520 \$

**F4** Of the tax-receipted gifts received by the charity for the fiscal period, enter:

- the total eligible amount of tax-receipted non-cash gifts (gifts in kind) 5600 \$
- the total eligible amount of tax-receipted tuition fees 5610 \$
- the total eligible amount of tax-receipted enduring property 5640 \$

**F5** Enter the amount, if any, of enduring property spent in the fiscal period. (See the guide.) 5710 \$

**F6** Enter the capital gains from the disposition of enduring property in the fiscal period. (See the guide.) 5720 \$

**F7** Is the charity claiming an amount that is less than the maximum capital gains reduction? (See the guide.) 5730  Yes  No

If yes, enter the amount from line 11 of form T1259. (See the guide.) 5740 \$

**F8** If the charity is taking a special reduction, which we have approved, to its disbursement quota, enter the special reduction amount for the fiscal period. 5750 \$

**F9** Did the charity acquire a non-qualifying security or allow a donor to use any of the charity's property under the circumstances described in the guide during the fiscal period? 5800  Yes  No

**F10** Indicate the average value of property not used for charitable activities or administration during:

- the 24 months before the beginning of the fiscal period 5900 \$ 4,478,150
- the 24 months before the end of the fiscal period 5910 \$ 4,876,349

**Section G – For Foundations Only**

Note: See the guide for an explanation of the terms and requirements of this section.

**G1** In the fiscal period, did the foundation acquire control of a share-capital or for-profit corporation? 6000  Yes  No

**G2** Did the foundation incur debts at any time during the fiscal period other than for current operating expenses, in purchasing or selling investments, or in administering charitable programs? 6100  Yes  No

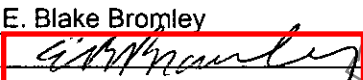
**G3** For private foundations only: At any time during the fiscal period, did the foundation hold any shares, rights to acquire such shares, or debts owing to it that meet the definition of a non-qualified investment? 6150  Yes  No

**Section H – Certification**

**H1** To be completed by a director/trustee or like official of the charity. It is a serious offence under the Income Tax Act to provide false or deceptive information.

I certify that the information given on this form, the basic information sheet, and any attachments is, to the best of my knowledge, correct, complete, and current.

Name (please print) E. Blake Bromley Position in charity Director

Signature  Date signed 2005/12/13

**Section I – Confidential Data**

**I1** Physical location (address) of the charity (Do not use rural route or post office box numbers.)

Number, street, apt. no., or lot and concession no. 1500 West Georgia Street, Suite 1555 Box 62

City Vancouver

Province or territory and postal code BC Postal code: V6G 2Z6

**I2** Location of the charity's books and records

Number, street, apt. no., or lot and concession no. 1500 West Georgia Street, Suite 1555 Box 62

City Vancouver

Province or territory and postal code BC Postal code: V6G 2Z6

**I3** Name and address of the person who completed this return

Name Pam Lushington

Firm name (if applicable) QDDQ Compliance & Administrative Services Inc.

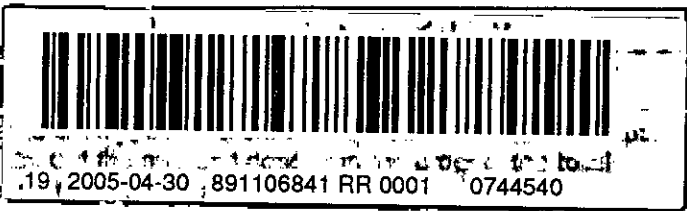
Number, street, apt. no., R.R. no., or P.O. box no. 1500 West Georgia Street, Suite 1555 Box 62

City Vancouver

Province or territory and postal code British Columbia Postal code: V6G 2Z6

Phone number (604)683-7006 Fax number (604)683-5676





### Qualified Donees Worksheet

Provide the name of each qualified donee, whether or not it is an associated charity, the amount of the gifts for the fiscal period, the amount, if any, of specified gifts, and the total amount of the gifts made, starting with the largest. Round numbers to nearest dollar.

Total number of qualified donees

Name of qualified donee: <input type="text" value="MSC Canada Inc."/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Mississauga, Ontario"/>			
BN/registration number: <input type="text" value="11904 2489 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="27,600"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Vancouver Native Health Society"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Vancouver"/>			
BN/registration number: <input type="text" value="13044 6933 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="15,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Dr Peter Aids Foundation"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Vancouver"/>			
BN/registration number: <input type="text" value="89738 1141 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="15,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Positive Women's Network"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Vancouver, BC"/>			
BN/registration number: <input type="text" value="13658 6443 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="15,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Columbia International University"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Columbia, South Carolina 'listed qualified donee'"/>			
BN/registration number: <input type="text" value="R"/>	Total amount of gifts: \$ <input type="text" value="20,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Friends of the Vancouver Public Library"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Vancouver, BC"/>			
BN/registration number: <input type="text" value="89803 2081 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="500"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Prairie Bible Institute"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Three Hills, AB"/>			
BN/registration number: <input type="text" value="10785 5116 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="26,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Boat Basin Foundation"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Tofino, BC"/>			
BN/registration number: <input type="text" value="88805 5423 R"/>	Total amount of gifts: \$ <input type="text" value="41,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Navigators of Canada"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="London, ON"/>			
BN/registration number: <input type="text" value="10808 9871 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="2,500"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Philanthropy Without Frontiers -"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Vancouver, BC"/>			
BN/registration number: <input type="text" value="R"/>	Total amount of gifts: \$ <input type="text" value="1,190,000"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	
Name of qualified donee: <input type="text" value="Canadian Physicians for Aid and Relief"/>		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: <input type="text" value="Toronto"/>			
BN/registration number: <input type="text" value="11883 5230 RR 0001"/>	Total amount of gifts: \$ <input type="text" value="375"/>	Amount of specified gifts: \$ <input type="text" value="0"/>	



### Qualified Donees Worksheet

Provide the name of each qualified donee, whether or not it is an associated charity, the total amount of the gifts for the fiscal period, the amount, if any, of specified gifts, and the amount of the gifts made, starting with the largest. Round numbers to nearest single dollar.

Total number of qualified donees

Name of qualified donee: <u>GiveMeaning</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>86848 7303 RR 0001</u>	Total amount of gifts: \$ <u>15,000</u> Amount of specified gifts: \$ <u>15,000</u>
Name of qualified donee: <u>Children's Arts Umbrella Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>88945 9798 RR 0001</u>	Total amount of gifts: \$ <u>1,000</u> Amount of specified gifts: \$ <u>0</u>
Name of qualified donee: <u>University of British Columbia</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>10816 1779 RR 0001</u>	Total amount of gifts: \$ <u>5,000</u> Amount of specified gifts: \$ <u>0</u>
Name of qualified donee: <u>St Paul's Hospital Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>11925 7939 RR 0001</u>	Total amount of gifts: \$ <u>25,000</u> Amount of specified gifts: \$ <u>0</u>
Name of qualified donee: <u>BC Cancer Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>11881 8434 RR 0001</u>	Total amount of gifts: \$ <u>25,000</u> Amount of specified gifts: \$ <u>0</u>
Name of qualified donee: <u>Howe Sound Samaritans Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>89242 0746 RR 0001</u>	Total amount of gifts: \$ <u>250,000</u> Amount of specified gifts: \$ <u>0</u>
Name of qualified donee: <u>Gateway Benevolent Society</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>89427 1618 RR 0008</u>	Total amount of gifts: \$ <u>665,000</u> Amount of specified gifts: \$ <u>665,000</u>
Name of qualified donee: <u>Essential Grace Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u></u>	
BN/registration number: <u>86330 9977 RR 0001</u>	Total amount of gifts: \$ <u>665,000</u> Amount of specified gifts: \$ <u>665,000</u>
Name of qualified donee: <u>Prescient Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>85580 2708 R</u>	Total amount of gifts: \$ <u>570,000</u> Amount of specified gifts: \$ <u>570,000</u>
Name of qualified donee: <u>Salama Shield Foundation</u>	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Location: <u>Vancouver, BC</u>	
BN/registration number: <u>89062 7672 R</u>	Total amount of gifts: \$ <u>10,000</u> Amount of specified gifts: \$ <u>0</u>
Name of qualified donee: <u></u>	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
Location: <u></u>	
BN/registration number: <u></u> R	Total amount of gifts: \$ <u>0</u> Amount of specified gifts: \$ <u>0</u>