

Launching the Ethiopia Project

I would like to contribute:

\$200

\$100

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Other amount:: _____

*** An official tax receipt will be issued by the University of Toronto.**

Name: _____ Telephone: _____

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Please return the portion of this form with your cheque payable to University of Toronto to:

Ethiopia Project c/o Lisa Habib, Department of Medicine, University of Toronto, 3-805, R. Fraser Elliott Building
190 Elizabeth St., Toronto, ON M5G 2C4

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