



# Donation Form

Fundraisers Name: \_\_\_\_\_

#	Date	Name	Full Mailing Address	Phone	Amount	Cash/Ck
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
					<b>Total</b>	
					Total Cash	
					Total Cheques	
					<b>Total</b>	

Tax receipts are issued for amounts of \$15.00 or more.