Page

W.S. War	Vonation Collection Form				
2014	Collector's Name:		Pack Name (if applica		
	Address:	City:	State:		
Riverfront	Phone Number:	Your Goal:			

Collect Donations – Show your Support!

All CHECKS will act as the donor's receipt. CASH donations of \$5 or more will be eligible for a mailed receipt IF donor's address is indicated.

Name	Address	City	State	Donation \$	Cash
		-			

Total \$: All donations due to NAFC Animal Shelter by 5:00PM on Sept 19th.

Contact us with any questions!

215 W. Market Street, New Albany, IN 47150 - (812)948-5355 -PAWSwalktheriverfront14@gmail.com