



## Donation Form

*\*Please fill out a separate form for each item donated\**  
*5 K Race and Raffle will be held on September 21<sup>st</sup>, 2008*

Description of Item: \_\_\_\_\_

Value of item: \$ \_\_\_\_\_

Would you like a receipt?  Yes  No

Donor Name	
Address	
Phone:	
<i>If donor is a business, please include the following:</i>	
Contact Name	

*Please check one:*

- Item is accompanying form*
- Item will be delivered to the school by 1-September-2008*
- Item requires pick-up*

*All donations are tax-deductible. School 501 (c) (3) ID: 93-1301833. Please return form to:  
 Swallowtail School, P.O. Box 3753, Hillsboro, OR 97123  
 Fax: 503-846-1626 email: info@swallowtailschool.org*

*Swallowtail Contact:*

Name	Phone
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*Signature:*

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Item received <input type="checkbox"/>	Thank You <input type="checkbox"/>	~For Office use only~	Item Number
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