



## DONATION FORM

Thank you for supporting Souper Bowls of Hope. Please contact me for pick up details prior to March 2, 2017

Committee Member	NAME:	PHONE:	EMAIL:
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### Donor Information:

BUSINESS NAME – As it should appear in program			
CONTACT NAME:		ADDRESS:	
PHONE	CITY:	Prov:	PC:
EMAIL (This is how we will send you your receipt. Please Print Clearly)			

### Item Information:

ITEM:	MARKET DOLLAR VALUE:	
ITEM DESCRIPTION – INCLUDE AS MUCH DETAILS AS POSSIBLE		
PROMOTIONAL MATERIAL IS INCLUDED: _____	SIGNATURE	DATE:
TAX DONATION RECEIPT IS NEEDED: _____		

### For office use only:

TRACKING NUMBER:	NOTES:
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Souper Bowls of Hope Charity # 135848950 RR0001

#### VICTORIA YOUTH EMPOWERMENT SOCIETY

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#### SOUPER BOWLS OF HOPE

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Email: SouperBowlsofHope@gmail.com