(Insert School Name) (Insert Complete School Address) (Insert School Phone #) (Insert School Fax #) (Insert Principal's name), Principal (Insert Assistant Principal's name), Assistant Principal

I	wo	ould like to donate \$	to (Insert Schoo
Name) for the following reason(s):		
Please	e indicate why funds are being donated by	selecting one of the choices belo	ow:
	To be used at the principal's discretion		
	To support the entire student body		
	To provide scholarship funds for needy s	tudents	
	Other		
Namo	of Donor (Please Print)		
ivame	of Doffor (Please Pfifit)		
Signat	ure of Donor		Date
Receiv	ved By		Date Received