

OUR GOAL: \$500

PROGRAMS AND COLLECTION ITEMS

بر النسيسال يو	ou help us rea	ch our goal:		
\$5	\$10	\$15	\$20	
\$50	\$75	\$100	You decide!	
Name (required for	donation receipt)			
City	Z	lip		
Phone				
checkout desl	pleted form and k, or mail to: GRR hecks payable to	L, 1300 W. St. Ge	ible donation ermain, St. Clo	to staff a ud, MN 5
For Accounting	g Use Only:	Ck#	Amount	\$
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