

## 

## **RECEIPT REQUEST FORMS**

Use these forms only for cash donations when the donor requests a receipt, or if the donor's check does not include name and address. Fairbanks Counseling and Adoption will provide a receipt for donations if the donor's name and address are known.

Return completed Donation Collection Form and Receipt Requests with donations to: Fairbanks Counseling and Adoption, 912 Barnette Street, Fairbanks, AK 99701

Please remind donors they can give online via your personal fundraising page.

Participant / Team Name:				Amount:
<b>Donor Information</b> □ Mr. First Name:				
Address, City, Zip:				
E-mail:				
MOSQUITO MEANDER   RE	CEIPT REQ	UEST FORM		
Participant / Team Name:				Amount:
Donor Information ☐ Mr.	☐ Mrs.	☐ Ms. / Miss	☐ Dr.	☐ Other
First Name:		Last Na	me:	
Address, City, Zip:				
E-mail:	Phone: ( )			
MOSQUITO MEANDER   RE				A ma a m h
Participant / Team Name:				
<b>Donor Information</b> □ Mr. First Name:				
Address, City, Zip:				
, ,, ,				

The funds raised at the 22nd Annual Mosquito Meander are vital to Fairbanks Counseling and Adoption's success and will benefit families and youth of the Interior.

THANK YOU FOR YOUR SUPPORT OF FAIRBANKS COUNSELING AND ADOPTION